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EDITORIAL COMMENT



THE FEDERATION OF AMERICAN NURSES

THE first formal meeting of the American Federation of Nurses marks an epoch in the history of nursing affairs in the United States, opening the way to wider scope and greater usefulness and giving us something tangible to rely upon in the great crises needing help which arise from time to time in our national life.

At this really great gathering one was impressed anew by the intelligence and dignity of the national meetings of nurses. The directness, force, and absence of parliamentary machinery usually so much in evidence in feminine organizations were particularly noticeable and distinctly gave the idea that here were women who met to work out things vital, not triflers nor seekers for notoriety and place.

In the Federation papers which are given in the present number of the JOURNAL one could not escape the forceful vitality of the writers, women whose untiring labors compel our attention, admiration, and gratitude. Mrs. Robb's prophetic insight, once more reaching out to make clear our future path, Miss Palmer's far-reaching knowledge of cause and effect in nursing affairs, and Miss Dock's wonderful perception of all phases of organization combined to make a trio not often heard at one meeting.

A careful reader of these papers alone may arrive at a very definite idea of the status of nursing in America.

The unanimous reelection of Miss Nutting for president of the Federation is a source of great pleasure and satisfaction, insuring a successful régime under her distinguished guidance.

THE CLASS OF 1906

THE young graduate occupies the centre of our stage at this season of the year.

To give her credit, we find her far less cocksure of the world she is to conquer than when she received her high-school or college diploma, which speaks volumes for her training. Almost universally we find her of earnest, serious mien, sometimes a little sadly so for her years, and we cannot help wishing that she will not take herself too soberly. Later we will see her, still young, bringing to our national gatherings reports of her labors such as we heard in Washington in May, and after our first anxiety in her behalf, which closely resembles the panic of a hen who sees her family of ducks swimming away, leaving her on shore, we will feel justly and vastly proud of her, with a comfortable security that when the time comes we may safely entrust our great hospitals, schools, organizations, and journals in her hands.

The JOURNAL wishes her God-speed, and reminds her that it owes its origin and existence to her needs, and that its pages are ever open for her help and betterment.

THE JUVENILE COURT

THE Alice Fisher Alumnae Association, of Philadelphia, at a recent meeting voted to offer assistance to the officers of the Juvenile Court of that city.

Such a step is most commendable—first, because no more worthy object to assist can be found, and, second, because it is a refreshing sign of the times to see our various alumnae societies finding outside interests.

It would seem that all nurses, and especially visiting nurses, might do an immense amount of good in the efforts to enforce the child labor and school laws now enacted in nearly every State.

date?

NATIONAL RED CROSS

THE following circular, issued by the American National Red Cross, cannot fail to be of interest to all JOURNAL readers:

"AIM AND PURPOSES OF AMERICAN NATIONAL RED CROSS.

"The International Conference which met at Geneva, Switzerland, August 22, 1864, agreed upon a treaty for the purpose of mitigating the evils inseparable from war. This treaty has been ratified by forty-four nations, including the United States. The conference recommended 'that there shall exist in every country a committee whose mission shall consist in coöperating in times of war with the hospital

service of the armies by all means in its power.' It also recommended the adoption and use of a distinctive flag and arm badge. This flag (a Geneva Red Cross on white ground) and arm badge or brassard (a Geneva Red Cross on white band) have been adopted and are now in use in every country having a National Red Cross organization.

"The charter granted by Congress in January, 1905, to the American National Red Cross declared the purpose of the corporation to be:

"To furnish volunteer aid to the sick and wounded of armies in time of war, in accordance with the spirit and conditions of the Geneva Convention.

"To act in matters of voluntary relief, and in accord with the military and naval authorities, as a medium of communication between the people of the United States of America and their army and navy, and to act in such matters between similar national societies of other governments through the "Comité International de Secours" and the Government and the people and the army and navy of the United States of America.

"To continue and carry on a system of national and international relief in time of peace, and apply the same in mitigating the sufferings caused by pestilence, famine, fire, floods, and other great national calamities."

"Congress considered the importance of the work so great that the charter granted in 1905 provided for Government supervision.

"The charter conferred on the Board of Incorporators and the Central Committee the power necessary to carry into effect the above provisions.

"In pursuance of this authority the Central Committee proposes to organize in every State and Territory of the United States branch societies, to enable every person who desires to become a member of the society, and awaken in this country the same interest in the objects of the organization that is so markedly manifested in every other nation having a National Red Cross Society.

"The necessity of being prepared for emergencies has been too often demonstrated to require argument. The object of the Central Committee is to have in each State and Territory a branch society that will be ready to act at once in time of war or disaster, and so strong in its personnel that it will command universal confidence.

"Each branch will act as a unit in the organization, and take charge in case of any great calamity in its State. Its Executive Committee or a special committee will enroll doctors and nurses for Red Cross service in time of war or great disaster in the State or its immediate vicinity. Reports as to the number of doctors and nurses enrolled by each branch will be made annually through the Central Committee to the Army Medical Department.

"In case of calamity its Executive Committee will receive and take charge of all contributions of supplies and materials, forwarding the same to the field of disaster.

"The secretary of each branch will keep informed as to the number, names, and addresses of the doctors and nurses enrolled for active service. This service may be given either without compensation or for the same salaries as those paid by the War Department—namely, one

hundred and fifty dollars a month for medical officers, and for nurses, forty dollars a month for service in the United States and fifty dollars a month for service outside the United States. The secretary will also keep informed as to where hospital and relief supplies can be obtained at shortest notice.

"Charts will be prepared by the Central Committee, based upon the regulations of the Army Medical Department, giving the personnel and supplies needed for a field hospital for forty-eight persons, so that any branch or a subdivision thereof will be able at short notice to provide such a hospital fully equipped for active service.

"The treasurer of each branch, in case of calamity in the State, will retain all moneys contributed for the relief work, keeping an accurate account of all receipts and expenditures, as the charter requires that all accounts be audited by the War Department. In case of calamities outside the State, he will forward promptly all contributions for the relief work to the Central Treasurer at Washington.

"The annual dues are one dollar, fifty per cent. of this remaining in the branch treasury and fifty per cent. being sent to the Central Emergency Fund.

"Life membership dues are twenty-five dollars, and all such dues form part of the Central Endowment Fund."

It will be remembered that a Red Cross committee, consisting of Miss Riddle, chairman, Miss Maxwell, and Miss Damer, was appointed by the Associated Alumnae last year. At its recent meeting the Superintendents' Society appointed a similar committee,—Miss Nutting, chairman,—the two committees to confer together in an effort to suitably represent nurses in the Red Cross Society.

With the Federation well organized and the existence of two such committees we may feel certain that no such confusion will again arise in an emergency as was witnessed at the outbreak of the Spanish-American War.

PROGRESS OF STATE REGISTRATION

THE Michigan bill for the State registration of nurses passed the Senate by a unanimous vote, but owing to the feeling in the House, which manifested itself strongly on this occasion against class legislation, the bill was totally defeated.

When the merits of the bill are more clearly and definitely understood no opposition is anticipated.

The preliminary work of organization of a State association of nurses in Minnesota took place in Minneapolis on May 26. The report will be found in our Official Department.

On April 19, 1905, Governor MacDonald appointed the following nurses to serve on the Colorado State Board of Nurse Examiners: Miss Lettie G. Welch, Denver, two years; Miss Louis Croft Boyd, Denver,

five years; Miss Winifred A. Donaldson, Denver, four years; Miss Lizzie L. Hudson, Colorado Springs, three years; Miss Nanna Clingan, Pueblo, one year. The first meeting was held on May 3, in the State Capitol building, Denver, when Miss Lizzie L. Hudson was elected president and Miss Louis Croft Boyd secretary.

The Washington State nurses failed to pass their registration bill, of which more information will be given later.

The Illinois bill for State registration has again been vetoed. We have received no further information.

It would appear that the Illinois nurses must follow the directions in the ancient cook-book for roasting a hare, "first catch your hare." With the veto of two Governors they will certainly need to first elect the right Governor.

EVERY profession produces types peculiar to the nature of the work done, but there is one type which afflicts all professions alike and from which the nursing profession has until recently escaped—namely, the superficially educated whose knowledge has been gained from books and teachers alone and not from the wrestlings and struggles of experience.

Van Dyke recently wrote a fine essay upon the relative educational value of schools and life's experience which gives food for thought to all readers and is a most encouraging comment upon the system prevailing in nursing schools where precept and practice go hand-in-hand.

The following extract from a private letter is an excellent example of the type above mentioned. The writer of the letter is one whose high ideals and daily work are identical, and who has made an honorable and widespread reputation for herself. She writes: "Miss X visited me to-day. I think you know she came to look over the — hospital. 'Not that I would take such a place, but it will be of educational value for me to see how such small hospitals are managed.' I think her whole mind since she returned from C is attuned to education with a capital E. You would never forget her if you could have the pleasure of listening to her for one brief hour. Her rising up and her sitting down, her going out and her coming in, her eating and her drinking—all, all have their educational value. She told me that it was 'high time that I started State registration. I was to go to B, three hundred miles away, and consult Miss D, and then if I worked with a will I would soon arouse an active interest;' in other words, I, who have lived here two years, was to start out on a campaign of instruction to nurses who have lived here twenty-two years. All this and much more, easier to relate than write."

The type is easily recognized. Let us hope the cases may be sporadic, sparing us an epidemic.

PROCEEDINGS OF THE FIRST MEETING OF THE AMERICAN FEDERATION OF NURSES

THE first meeting of the American Federation of Nurses was held at the George Washington University, Washington, D. C., on Wednesday, May 3, 1906. The meeting was called to order at ten-thirty A.M. by the president, and the opening prayer was made by the Rev. Wallace Radcliffe, D.D.

OPENING PRAYER

"Almighty God, in the name of Jesus Christ, Thy Son, we offer unto Thee our thanks for Thy goodness to us and to all men, especially for Thy goodness unto these Thy servants that Thou hast watched over them in the house and by the way and brought them into this way and into this place in the fulness of Thy blessing and in the joy of Thy presence. Now we pray Thee that Thou wouldst endow us with the spirit of Thy Son, Jesus Christ; we pray Thee who was bruised for our iniquities and wounded for our transgressions. We remember that wondrous example in His life upon the earth that He went about continually doing good, and now do Thou help us by the grace of Thy Holy Spirit to follow in His footsteps; teach us to love those in need and in distress; Thou hast taught us that we cannot love God whom we have not seen save as we love our brother whom we have seen. Help us to keep Thy commandments that we love one another and go out in tenderness and patience, in service and in sacrifice, to comfort and uplift those that are in need. We remember in this hour the great multitude of the sick and suffering, those tossing on beds of pain, those in lowly homes, in hospitals, to whom Thou hast come in Thy providence with the touch of pain and sickness and disease. Help them, O Christ! We thank Thee for Thy providence that hast brought us in these days the ministry of science, the skill, the knowledge that so largely relieves the suffering and brings peace and comfort and health again. We pray for Thy blessing upon the great multitude of physicians, and especially upon these who have devoted themselves to this service of nursing, that Thou wouldst protect them in Thy providence, that Thou wouldst guide them by Thy Holy Spirit, and that Thou wouldst uplift them in the sense of co-working with Thee and use them as a benediction upon those that are in need. And so, Heavenly Father, do Thou continue Thy grace with the word and the example and the life of Jesus Christ made more and more manifest in our humble bodies that others may see our good works and glorify our Father in Heaven.

"We pray for Thy blessing upon this convention; do Thou surround them by Thy loving care; preside over them by Thy Spirit, and

guide them in wisdom; teach them Thy knowledge. Jesus Christ, whose heart is touched with a pity for our infirmities, go with them from this place, so that with a greater faith and nobler service they may do Thy will and give glory unto Thee. These and all blessings for ourselves and for all men we ask for the sake of Him who has taught us to pray, saying, 'Our Father which art in heaven, hallowed be Thy name. Thy kingdom come. Thy will be done in earth, as it is in heaven. Give us this day our daily bread. And forgive us our debts, as we forgive our debtors. And lead us not into temptation, but deliver us from evil: For Thine is the kingdom, and the power, and the glory, forever. Amen.' "

Miss NUTTINE.—We have the great good fortune to have with us this morning the Hon. Henry B. F. MacFarland, President of the Board of Commissioners of the District of Columbia, who will extend to the visiting members of our society a welcome in the name of the city.

The Hon. Henry B. F. MacFarland, President of the Board of Commissioners of the District of Columbia, delivered the following

ADDRESS OF WELCOME

"MADAM PRESIDENT AND LADIES, AND DR. RADCLIFFE: The doctor and I feel very lonely on this occasion. It has been my pleasant office for several years to have the opportunity of welcoming to the Capital City many conventions, but usually they are conventions of men, and that is a comparatively easy task. Even though I have passed the first Osler period and am no more capable of creative work, I am able to create an address for mere men, but when it comes to the superior sex I confess that I stand, as usual, in awe and trepidation. However, back of every man there is, of course, a woman making or marring him, and back of me, fortunately, stands my wife, who, after all, contributes all that is best in my speeches, and naturally I turned to her. I said, 'This is a very serious emergency that confronts me,' and she reminded me of the girl who, when she was asked what she would do if the young man offered to kiss her, said, 'I should meet the emergency face to face.'

"She also has contributed a clipping which she cut from yesterday's *New York Tribune*, and which reads: 'Miss Death was brought to the German Hospital in Philadelphia to be operated upon for appendicitis; she was the daughter, she said, of an undertaker; the name of the surgeon who was chosen to perform the operation was Dye—Frank Hackett Dye. When the operation was over Miss Death was placed in charge of two nurses, Miss Payne and Miss Grone; Miss Payne was the day nurse and Miss Grone the night nurse. The patient recovered rapidly (and that was one of the occasions when not only the operation was successful

but when the patient recovered) and in a short period bade good-by to the two faithful nurses, Miss Payne and Miss Grone and to Dr. Dye.' I think she was very fortunate to escape.

"We take particular pleasure on behalf of the government and the people of the District of Columbia in welcoming you to Washington, first, because you are women, and second, because you are doing some of the noblest work in the world. You can truthfully say that your profession is a calling, and a calling of God in the good old phrase. In the great army of those who are marching ever over against the army of those who kill you have a most valuable place. You have won it as a profession in a very short time comparatively by honest, intelligent, high-minded self-sacrifice and great effort. We find it impossible to give our highest admiration to mere material achievement or to selfish aggrandisement, however splendid it may seem. We feel instinctively and rightfully that there must be unselfishness in success and in the service of others—indeed, sacrifice and denial of self—to draw out the homage of our hearts. Captains of industry, of science, and of skill may command and do command our head, but not our heart, by their achievements, and the best of them after they have won their kind of success crave the higher kind and try to do something to win it. Your sisters who have given their lives in saving others have ennobled you all. Hence, we desire to serve you and to honor your profession, and for this reason, as well as to protect the public, we here are endeavoring to secure for the District of Columbia a law which will give the trained nurse the highest status and protection in her profession and in her work, given her by the best laws in the world, and I am gratified to say that I believe there is good hope of its enactment at the next session of Congress. It was a personal pleasure for me to handle the measure, so far as the Commissioners were concerned; of course, I had the advice of your representatives here, and especially of our friend, Miss Nevins, whom we all honor, but for the legal side of it and for the official side of it I was very glad to have my opportunity, and I am very pleased to believe, as I have already said, that it is likely to be looked favorably upon at the next session of Congress.

"We are very sure that we will have your sympathy and support in whatever may be done, and I want once more to say that I trust you may have a most profitable and pleasant visit here. I cannot say in words what is in the hearts of all of us who have placed ourselves at times, or, far more important, those whom we love, in the hands of the representatives of your profession. It would be impossible for me to say in any public gathering what we owe to you through them, but I have already said, and I desire to repeat, that I represent, I am sure, the sentiment of our whole people when I bid you a hearty welcome."

MISS NUTTING.—I will call upon Miss Isabel Melanac, of the Illinois Training-School, to respond to this address.

Miss Melanac responded as follows:

"MADAM PRESIDENT, LADIES: I feel that it is a distinctive honor as well as a pleasure to be asked to respond in behalf of the American Federation of Nurses to the cordial greetings that we have received from Washington, both from the nurses and the citizens. I think I may say without danger of giving offence to our hosts of previous occasions that in no city has there been such a lively interest and pleasure exhibited in anticipation as there has been for this meeting in Washington, and certainly our anticipations have been fully realized if the members present are any evidence. We feel very glad to enroll ourselves among that long list of organizations which so many years ago gave this delightful city the name of 'The Convention City,' and I trust that this first meeting of the American Federation of Nurses, which has so fittingly taken place at the seat of the government of the nation, shall be an omen for its future, because the American Federation of Nurses up to this time has simply been a name, and we need that it shall be something besides a name. The two great associations, the Superintendents' and the Alumnae, have widely diversified aims, but we have many aims in common, and if the old saying that the boy is the father of the man is a true one, then I think that the pupil nurse is the mother of the superintendent of nurses. Again I would voice the sentiment of the Federation of Nurses in giving thanks to the graduate nurses and to their friends and to Washington for this very cordial greeting and warm hospitality."

Miss M. A. Nutting addressed the Federation as follows:

ADDRESS BY THE PRESIDENT

"MY FELLOW-WORKERS: This meeting is one of much significance. It is the first formal gathering together of our two important nursing societies to consider the purposes for which we are federated, and to determine our powers and responsibilities in that relationship.

"This Federation, entered into some years ago, unites the great body of graduate nurses, known as the Associated Alumnae, in whom we see represented by delegates here to-day nearly one hundred of the alumnae associations of the best schools of our country, and behind them standing an army of over seven thousand nurses, and the older and smaller body, the superintendents and the teachers.

"There is a peculiar interest about this gathering to one who, at a convention of superintendents held in Philadelphia in 1896, listened to the story of how such a national association of nurses as this might be

formed, and of what useful service to the profession and to the community it might render. I was that listener, and the story was told by one whom you all know well, Miss Deck, and though I admit at the time the founding of such a national society seemed to me rather a far-away vision, I had the pleasure of moving the appointment of the committee which took the first steps towards your organization. In the following year the constitution of this society was framed and adopted, and your first president was elected in the Training-School of the hospital to which I belong, and I have a further peculiar interest because that first president, to whom you so wisely entrusted the difficult and delicate task of early organization, was my teacher, the former superintendent of our school, Isabel Hampton Robb. It is fitting here at this moment to say, in recognition of Mrs. Robb's work, that she has been a powerful, guiding, shaping influence in the nursing profession from the day she entered it—that both of these societies here united to-day owe an eternal debt of gratitude for the splendid labor which she has given and still gives to nursing affairs and interests.

"So it is not to-day as if two strange, unrelated societies were trying to find ground on which to unite, for the younger and larger society is the direct outcome of the interest and effort of the older, and, still more, it is composed of the graduates of the schools which are under their direction. Its growth and tendencies are as anxiously watched as are those of the daughters of any great household. The Society of Superintendents of Training-Schools for Nurses has just completed its eleventh year with a roll of two hundred and fifty members. It has an honorable record of work undertaken and accomplished for the benefit of training-schools and of the profession, and it has before it many problems which will take all the combined wisdom and experience of its members to solve. The educational system of training-schools for nurses is undergoing a complete transformation, and never did any profession need more leaders who are not carried about by every new wind of doctrine, but women of judgment, stability, and foresight, or, rather, of that prophetic insight into further possibilities which marks those greater than their fellows. To the younger body I would say, we have much to consider; we are not yet adjusted to the needs of the public. (The criticisms of us as members of a profession are constant, severe, and searching. We claim, and I think justly, the status of a profession; we have schools and teachers, tuition fees and scholarships, systems of instruction from preparatory to post-graduate; we are allied with technical schools on the one hand, and here and there a university on the other; we have libraries, a literature, and fast-growing numbers of periodicals owned, edited, and published by nurses; we have societies and laws. If, therefore, we claim to receive the

appurtenances, privileges, and standing of a profession, we must recognise professional responsibilities and obligations which we are in honor bound to respect and uphold. We cannot proceed comfortably to adjust our lives according to our own petty personal views; we have to think of ourselves each as one of a vast body, and know that we each contribute to the credit or discredit of that body. There are many of our affairs in which the public are most directly and vitally concerned which need our earnest and thoughtful attention. We need to apply unsparing self-scrutiny. With the deepest possible affection and sympathy, let me say that the discontent with trained nurses in private households is wide and deep and constant, and that we have a work before us to hold the confidence of the public, to find out what that trouble is and how to remedy it? No profession ever rose to a high position more rapidly than nursing. Much of the admiration which we have received has been deserved, and it would be a calamity indeed if we have through the weaknesses or selfishness of any one of us injured its fair fame. We need to keep in constant use our professional ethics, or, I should say, the ethics of Christianity. When the public says plainly that we fail to guard sacredly the private matters of the households we enter, but discuss them among ourselves and pass them on to subsequent patients; when it says that our system of payments makes practically a labor union, and that no human distress or need is sufficient to make us ready either to alter our charges or give freely something of skill and knowledge; when it says loudly and repeatedly that we are wasteful in people's households to the verge of dishonesty of every article in common use,—there is something wrong, and the sooner we get it right the better. No one of us stands alone; we are related to others in every action of our lives, and in that relationship the power of things, good or evil, lies in our hands. We can help to make the world better or worse. Every one of us leaves the world definitely altered because of our acts. The one thing we cannot do is to do nothing. When Florence Nightingale entered a little school at Kaiserswerth sixty years ago it was an act which profoundly affected every one of us here to-day, many thousands of women before us, and many thousands who will follow. Training-schools are in existence because of her work, and alumnae follow the school. When Mr. Rathborne supplied the first district nurse to a poor section of the city of Liverpool he affected the lives of many, many nurses, and set in motion a system of work which is fast becoming one of the greatest and best humanitarian agencies. When some years ago Honnor Morten got permission with difficulty to place a nurse in the public schools of London, do you think she had any imaginings that the impulse of her efforts would in a few years extend into the public schools of the city of New York? There is nothing more eternally true than that no man liveth to himself.

"I congratulate you, fellow-workers, on all that has been accomplished for and by nurses, and I welcome you to a consideration of the matters which will come before you to-day and in the following days, praying that we may bring to them the spirit of justice, truth, and humility. We are blessed beyond many other women in being given the chance to work, and I would say here that of all the evils that I know to-day, idleness is one of those most to be feared and dreaded in its effects upon human character. Burton gives it credit as the great cause of melancholy and other diseases, "As ferns grow in an untilled ground, and all manner of weeds, so do gross humours in an idle body." He adds, "An idle dog will be mangy, and how can an idle person think to escape?" We have not only work, but work of a noble and uplifting kind. In a very beautiful address given to the Society of Superintendents on Monday President Needham concluded by saying, "I welcome you to the aristocracy of labor, to the nobility of knowledge." This morning we will be asked to extend our fellowship and join hands in some permanent way with our struggling sisters across the water, and remembering what has just been shown, what we owe English nurses for inspiration and example, any help which we of larger liberties can give will be freely and gladly extended. As a Federation we shall meet together seldom, but these meetings should always be of much moment, and as the presiding officer of this organization let me, in welcoming you, wish you God-speed. I declare this meeting open for work."

THE EFFECT OF STATE REGISTRATION UPON TRAINING-SCHOOLS

By SOPHIA F. PALMER

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"It has been somewhat difficult in preparing this paper upon the subject of the 'Effect of State Registration Upon Training-Schools' to obtain definite facts. The time is too soon for great results, and I have not been able to give the time to the investigation that the subject needed, nor have I received that cordial coöperation from all of the superintendents to whom I have appealed for assistance that I hoped for, but such statements as I make are based upon knowledge that has been gained either through my experience as a member of the Board of Examiners of New York State, or from information received from women who are actively engaged in State work.

"On broad general principles the effect of the State registration movement has been to stimulate training-schools almost universally,

reaching out over the borders of our own country into Canada, as I shall show you in connection with the practical working of the New York statute, and at closer range acting as a direct means of elevating the standards of theoretical and practical teaching, and forming a basis for that uniform curriculum which for so many years it has been one of the aims of the Superintendents' Society to perfect.

"Holding New York until the last, I shall give the reports from the other States in the order that the laws went into effect.

"The North Carolina 'Bill for the State Registration of Nurses' went into effect March 2, 1903. This bill makes no special provision for regulating the standards of training-schools, but in its practical effect it is having a decided influence upon the methods of training of the schools within the State, insuring better instruction in all branches, and a general move for preliminary training and coöperation among the superintendents of the training-schools of North Carolina for higher standards.

"The New Jersey law, passed in April, 1903, is said to have affected training-schools but very little if any, but the New York registration requirements have had a decided influence in this State owing to its close proximity to New York City, where so many of New Jersey's graduates are employed.

"From Virginia, where the law was passed in May, 1903, I am unable to give a report, though one was promised me.

"The Maryland law, passed in April, 1904, begins to show its influence upon training-school standards, but reports are only very general in character. The feeling among the schools is cordial and coöperation between general and special hospitals is beginning. The large schools are opening their doors for one year's experience to graduates of special schools, so that they may qualify under the law.

"From Indiana I have no report, though their bill was passed and became a law February 27, 1905.

"Since the agitation in California began there have been instances of reorganization in a number of schools, but it is said that the authorities of some of these schools seem somewhat inclined to deny that they have been in any way influenced by the prospect of legal requirements. The passage of the law in this State, as in Indiana and Colorado, is of too recent date to show results. The effect of the agitation in the two last mentioned States I do not know, the fault being mine in not taking more active measures to obtain the facts.

"This brings me to the Registration Act of New York State, which became a law April 27, 1903, and which contains in its first clause this proviso:

"Any resident of the State of New York, being over the age of

twenty-one years and of good moral character, holding a diploma from a training-school for nurses connected with a hospital or sanitarium giving a course of at least two years, and registered by the Regents of the University of the State of New York as maintaining in this and other respects proper standards, all of which shall be determined by the said Regents, and who shall have received from the said Regents a certificate of his or her qualifications to practise as a registered nurse, shall be styled and known as a registered nurse, and no other person shall assume such title, or use the abbreviation R. N. or any other words, letters, or figures to indicate that the person using the same is such a registered nurse.'

"There has been for many years in the Regents' Office, or the Education Department, as it is now called, a system of registration, and there may be found in the archives of the State the standards maintained by all the great educational institutions of the world, to which have now been added, by the passage of the New York Registration Act, training-schools for nurses.

"The Board of Nurse Examiners were appointed according to the conditions of the statute and called together for organization and business at the Regents' Office in Albany September 15, following the passage of the bill.

"It would occupy more time than is legitimately mine to go into the detail of the preliminary and organization work of the New York Board more than to state that we had only to adapt the peculiar conditions of nursing education to the machinery of the registration laws that were already in operation in the Regents' Office in connection with the registration of the other professions.

"For instance, the forms used for the registration of training-schools were a modification of those used for medical colleges and other institutions of learning that had been registered with the Regents for years. The forms for individual registration of nurses were, with some additions and modifications, the same as those used for physicians, and the board profited greatly by the experience of the gentlemen having charge of the registry department at Albany.

"On the other hand we have had some difficulties to overcome in adjusting the peculiar requirements of nursing education to a system that deals with the theoretical side of educational affairs only, while so much of the important side of nursing is based upon the practical. However, the coöperation from the Regents' Office has been of such a cordial and intelligent character that the board is beginning to feel exceedingly gratified with the results.

"In the beginning all questions regarding the eligibility of schools

were referred to the Board of Examiners. We had just gotten into smooth working order and were beginning to feel somewhat familiar with our very new kind of business when the Unification Bill became a law, which brought about a complete reorganization of the Education Departments of the State, resulting in changes of officers in all departments from the Commissioner down, and not only checking our work for four months, but changing it somewhat and making it necessary to begin all over again with a new set of people in the Education Department, so that during the two years that have passed since the New York law went into effect, the work of the Board of Examiners has been in active operation less than sixteen months, and during that time many weeks have been lost through unavoidable causes of delay.

"I have made this explanation because at first hand the figures that I shall give you may seem small for the length of time that has elapsed since the passage of the New York Registration Act. These figures are not supposed to show all of the work that has been done, but simply to show in what way the law has affected the limited number of schools that it has been possible for me to reach.

"The United States Bureau of Education gives the total number of training-schools in the United States at the close of the year 1903 as five hundred and fifty-two, eighty-four of these being accredited to New York State.

"Large numbers of nurses trained in schools in all parts of the other States and Canada are engaged in nursing and claim their residence in the State of New York, and in order that these women may be registered the schools from which they have graduated, no matter at how great a distance, are required to comply with the standards fixed by the Regents in exactly the same way that the schools of the State are required to do. The official papers in connection with the registration of training-schools are filed in the Education Department at Albany. Since the reorganization previously referred to the eligibility of training-schools is decided in that department, based upon conditions and requirements recommended by the Board of Examiners, and adopted by the Regents as being the proper standards referred to in Section 1 of the statute. These requirements are very simple in character, that no hospital in the beginning should be unjustly demoralized by demands that it could not be legitimately asked to meet. These requirements read as follows:

"REQUIREMENTS FOR REGISTRATION IN FORCE JANUARY 1, 1904-6.

"INCORPORATION.—The training-school for nurses or the institution of which it is a department must be incorporated.

"PRELIMINARY EDUCATION.—All training-schools registered by the Regents

of the University of the State of New York shall require of pupils applying for admission a certificate of graduation from a grammar-school or its equivalent, preference being given to applicants who have had one year or more in a high school and to those who have taken a full course in domestic science in a recognized technical school.

"SUBJECTS OF STATE EXAMINATION.—Training-schools for nurses registered by the Regents shall provide both practical and theoretical instruction in the following branches of nursing: (1) medical nursing (including materia medica), (2) surgical nursing, with operative technic including gynecological, (3) obstetrical nursing (each pupil to have had the care of not less than six cases), (4) nursing of sick children, (5) diet cooking for the sick, including (a) twelve lessons in cooking in a good technical school, or with a competent diet teacher, (b) food values, and feeding in special cases, to be taught in classes, not by lectures, (6) a thorough course of theoretical instruction in contagious nursing where practical experience is impossible.

"Training-schools for male nurses shall provide instruction in genito-urinary branches in place of gynecological and obstetrical nursing.

"PROFESSIONAL EDUCATION.—The period of instruction in the training-school shall not be less than two full years, during which time the students shall not be utilized to care for patients outside of a hospital. Training-schools giving a three-year course and wishing to continue the practice of utilizing their pupils to earn money for the hospital may send them out to private cases or for district work among the poor for a period not exceeding three months in the third year of their course. But training-schools with a two-year course wishing to continue the practice must extend their course to meet the above requirement.

"PROVISIONAL REQUIREMENTS.—The branches of nursing in which both practical and theoretical instruction must be given by training-schools applying for registration will remain in force till January 1, 1908.

"SUGGESTED LINES OF DEVELOPMENT.

"PRELIMINARY EDUCATION.—After January 1, 1908, all registered training-schools for nurses must require the completion of one year of a high-school course subsequent to an eight-year grammar-school course, or the equivalent.

"PROFESSIONAL EDUCATION.—The elaboration of the curriculum to be developed by January, 1908, and the lines on which this development may be expected are:

"Preliminary training. Training-schools should teach their probationers before placing them at the bedside of patients:

"a. The various methods of making and changing the bed, with and without the patient;

"b. The temperature of baths, and the simple methods of administering them;

"c. The use and dangers of the hot-water bag;

"d. The principles of sweeping and dusting;

"e. The setting of trays, etc.

"This instruction can be given easily in the nurses' home by the superintendent of nurses or by a delegated nurse. Instruction in these simple principles cannot be given uniformly in the rush and pressure of busy wards. It demands no additional service or expense on the part of the hospital and tends towards the preliminary training that is rapidly gaining favor in the schools

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of higher grade. It is not intended as a substitute for the bedside instruction, but as a preparation for it. The patient should not be required to wait for an ordered poultice till the head nurse can show the probationer how to make one. Many similar facts can be taught separately, the final and all-important part coming at the bedside when these bits of deftness are applied to the relief and not to the embarrassment of the patient. Preliminary training in the leading schools covers a period of from one to six months, but the simple practical instruction here suggested is given in many schools that do not profess to have a regular preliminary course.

"*Small classes.* In place of the elaborate system of lectures given gratuitously by members of the medical staff, training-schools should adopt more advanced methods, affording instruction in the same subjects to smaller classes by competent teachers and clinical demonstrations by members of the medical staff. Many schools publish an elaborate lecture course, but being dependent on busy medical men such instruction is frequently and unavoidably not given, to the great injustice to the pupil in training. Instruction in small classes in many schools unable to provide paid teachers is given by the younger medical men affiliated with the hospital, who teach such subjects as bacteriology, anatomy, physiology, materia medica, and chemistry, while the more important subjects of the care and management of acute cases are reserved for members of the regular staff."

"It would seem almost incredible that there should be training-schools graduating nurses for general work which could not give both theoretical and practical instruction in the branches of nursing mentioned in these requirements, but it had come to the knowledge of the examiners that many schools provided no practical experience in obstetrics, others were lacking in the care of children, many in domestic science; that in some materia medica was not taught systematically, and that a thorough theoretical course in contagious nursing was not given when practical experience was not at hand; also that the lecture courses were considered a fair substitute for experience in many schools, and we were guided by this knowledge in making our recommendations to the Regents.

"It was impossible for me to personally examine the official records in Albany, and during the first week in March I mailed circular letters to one hundred and fifty superintendents of selected training-schools in which I asked the following questions:

"1. Have the registration laws or the prospect of such laws brought about any changes in the curriculum of your training-school? If so, in what way?

"a. Practical experience, in what branches?

"b. Theoretical instruction, in what branches?

"c. Preliminary training, to what extent?

"2. Have these changes, if any, necessitated additional instructors

"a. Physicians?

"b. Nurses?

"c. Specialists (non-professional)?

"d. Domestic science?

"General remarks.

"Signature."

"Seventy of these superintendents have made me no answer, but I know that a number of them are superintendents of schools that have been obliged to completely reorganise in order to meet the simple requirements of the Regents, and I am inclined to think that a few did not reply because they were unwilling to acknowledge the low standards of the schools with which they were connected.

"The replies from the remaining eighty came promptly and cordially. Of these nineteen were above the standards; fifteen had made no changes and it was not stated whether they were above the requirements or not.

"A total of forty-six schools reported changes in their curriculum because of the requirements of the New York law—twenty-six in the State and twenty in the other States and Canada.

"Three have stopped sending out pupils; six have added materia medica to the curriculum; seven have added facilities for practical experience in the care of children; ten have added massage; thirteen have extended the course from two years to three; thirteen have added obstetrics; sixteen have added preliminary instruction; twenty-seven have increased their corps of instructors, varying in numbers from one to seven; thirty-one have added domestic science.

"The letters accompanying these statistics have contained many interesting facts. Some writers state that the medical lecturers are giving much more attention to their subjects than formerly, and that such lectures are given with much greater regularity; also that pupils in training are showing a more conscientious desire to do good work, realizing that their future success is at stake if they do not improve every opportunity.

"Some few state that applications are fewer, but the quality of those applying is better. In some instances changes have been brought about with comparative ease since the registration movement, that our women have been working unsuccessfully for years to accomplish.

"It is clearly shown that the influence of registration is a stimulus to better work, even in those schools where no changes have had to be made.

"The Regents' Office at Albany shows on April 24 one hundred and thirty-nine training-schools registered with seventy-one pending; this means that they are either unable to meet the requirements immediately, or that they are waiting for a visit from the inspector.

"Of these one hundred and thirty-nine schools two are in California, six in Canada, five in Connecticut, three in the District of Columbia, one in Florida, six in Illinois, one in Indiana, one in Maine, three in Maryland, ten in Massachusetts, five in Michigan, one in Minnesota, seven in New Jersey, two in Ohio, one in Oregon, eleven in Pennsylvania, one in Rhode Island, one in Utah, one in Virginia, seventy-seven in New York.

"With the official registry in Washington showing eighty-four training-schools in New York State, it would seem as if the New York schools were now very nearly all registered, and that the influence of the New York law was beginning to be felt in some degree in all sections of this country and Canada.

"It is too early to treat conclusively of the influence of registration upon training-schools, for the reason that every day is adding to the list schools that are conforming to the New York requirements. Many schools at a distance have as yet no conception that they have a duty in the matter until a letter from a distressed graduate living in New York brings the fact to their attention. If it is then found that the methods of the school are below the minimum requirements which schools of New York are conforming to, they are stimulated to add to their curriculum such branches as may be lacking.

"These changes sometimes require reorganization of hospital administration and additional expense and in many instances must be made slowly, and it may be weeks or months before the superintendent is able to fill out the blank, swear to its accuracy, and send it to Albany.

"The most encouraging aspect of the whole matter has been the cordial manner with which a fixed standard has been welcomed. Of course, this applies to the smaller schools and to the schools which we would call of lower grades. The schools of high standards have not been in any way affected, and will not be, except as to the quality of their work, as the requirements of the law must always be for a minimum standard, the very least that the State is willing to recognize.

"The general attitude of training-schools has been one of cordial compliance with the standards established by law. Schools lacking in facilities have shown what has seemed to me a remarkable willingness to supply them; a goodly number of schools are being prevented from complying with the requirements, not because of unwillingness, but because of inability to obtain added experience and instruction through affiliation with other hospitals.

"Schools are now asking the Education Department at Albany for a curriculum which the examiners are asked to prepare.

"We need a more liberal attitude on the part of the splendidly

equipped schools towards the smaller and poorer ones. Much of the opposition to a broader affiliation, I have reason to believe, comes from the women at the head of the schools, rather than from the management. This prejudice I confess to have felt at one time myself and I have much sympathy with it, but at the same time I realize since assuming the responsibilities of an examiner, that in order to attain the standards of education which we all now believe are necessary, there must be a wholesale sweeping away of our old prejudices, a more cordial coöperation between large and small schools, hospitals for the insane, general hospital and special schools, rich schools and poor, until every hospital, however small, that is doing honest work in caring for the sick can give the assurance to its pupils of a fair all-round general training through affiliation with different groups of hospitals.

"Only through State registration and the compelling influence of the law can these changes be obtained."

MISS NUTTINS.—I voice the feeling of all present in saying with what pleasure we have listened to this truly admirable paper of Miss Palmer's. Great as is the respect felt for the law, I doubt if any one of us realizes the power which it can exercise until we are confronted with its effects. This paper is now open for discussion, and you are invited to discuss it very fully. Those of you who know and can speak of the effects of legislation within your knowledge and experience, and those of you who have any questions to ask, are urged to do so now at the close of this paper, unless you feel that every point has been so well taken up that there is absolutely nothing left to be said.

MISS PALMER.—I know that there are some women in this room who have been helped by the influence of the law. They have told me so since they have been here. I think that as a favor to me they should get up and state what these good effects have been.

MISS SHIVELY.—I would like to say that the influence of registration in the United States is telling upon Canada. We have taken only a few steps so far and you are very much ahead of us, but I wish to say that I was approached not very long ago by the superintendent of a small training-school who said that she had made application to New York for the registration of her school, and that no permanent record had ever been kept in that school, nor had it been kept in several other small hospitals, of the time spent in the various departments. The question in her mind was, "How shall I fill up that registration paper for my nurses who are in New York and wish to continue their practice there?" I said, "Well, you will have to tell the truth, and you are now what the effect of registration means; it means that you will have to do better work."

MISS MAXWELL.—May I say that the effect of registration in New York has been that application is being made for schools throughout the State for supplementary education.

Mrs. FOURSTER.—At the Indiana State meeting held in Fort Wayne we had several superintendents of small training-schools who came purposely for information as to how to extend their course of training in their schools and to find out how, if by any means, they could affiliate with larger institutions for special

work and for extra work. Indiana is, of course, made up of small towns,—villages, I might say,—but still so far situated from each other that hospitals are a necessity, and we have all kinds of experience in those hospitals. We have very good experience for nurses, but we have not special work for them, and they are beginning to question all over the State of Indiana how to give the nurses special work that is required, and I am sure that some of the hospitals of the East that will give and are giving a post-graduate course will hear from a number of graduates from Indiana in the near future.

MISS NUTTINE.—This is excellent, and I think there are more members present who can tell of very much better results in their work following upon the registration bill.

MISS CABANISS.—The secretary of the State Society of Virginia is here and can tell you something.

SECRETARY STATE SOCIETY.—We have received a great many letters from superintendents of the different hospitals in reference to the standard applied to Virginia. One hospital held a meeting and many of the smaller schools have affiliated with the larger schools in obtaining a better course of instruction. Their pupils are sent to the larger hospitals to receive instruction, and in many ways they have shown a great interest in the bill and in the raising of the standard. I would like to say right here, graduates of the larger schools should be more willing to take positions in the smaller hospitals. I think all would recognize the difficulty in getting the graduates of the larger schools of the country, especially of the very large cities, to go into these small schools and take positions. Of course, it is a money sacrifice and a sacrifice to ambition in a way, but I wish we could realize the good to the profession that they could do by taking these positions. They are doing good, faithful work, there is no question about that, but I am sure that the very idea Miss Palmer speaks of, in bringing more sympathy between the larger and smaller schools, could be very much sooner established if the graduates of the larger schools would be willing to sacrifice a little and take these positions in the smaller hospitals.

MISS NUTTINE.—Miss Cabaniss makes a very interesting suggestion and one that has come to the minds of many of us, that the school cannot be any stronger than its representative, and if those who have had great opportunities are willing to bring them to the help of the smaller schools a difficult problem might be solved. Is there someone else who has a contribution to make to this subject?

MISS DAMER.—Speaking for New York State, I feel that I cannot supplement anything Miss Palmer has said, as we have worked together in securing registration in our State and have been associated together on the Board of Examiners of our State since registration, but I just want to say a word as to the effect upon training-schools, and that is the great interest which the public has in the effects of registration, and they are taking a greater interest, and it is awakening a noble pride, you might call it, in the nurses in considering what their own schools are doing and if they are coming up to the standard, and they are going to demand that they shall come up to the standard and take their place with the larger schools that have that recognition, and I think that it is creating a desire among the profession to consider more closely the work that the school is doing and a demand for recognition for the alumni of the school on the training-school boards, and it will mean too that we will look to our training-school boards to carry out such measures as will receive our commendation and be our pride and that will receive our loyal support, and that we will turn as a

profession to these schools to send out broad-minded, accomplished, educated, and good women who will assume all the new and improved duties of the new generation of nurses.

MISS NUTTIN.—There was one feature of Miss Palmer's paper that was particularly interesting, and that was the number of schools which had considered the question of domestic science and had introduced it into their training; is there anyone here who can add a little information to that feature of Miss Palmer's paper?

MISS VAN KIEK.—I would like to speak of the influence on the insane hospitals. The Regents have required that these nurses should have experience in maternity and children's work, so they have applied to the hospitals that give that training, and in every case women who have spent three or four years training in an asylum have been greatly improved, even in the hospitals where the standard has not been as it should be.

MISS NUTTIN.—If the New York law has been able to accomplish so much, why may it not take up the work of the third year and see if pupils should be sent out in the third year to private duty or any other duty? If there is no further discussion, I will call upon Mrs. Hunter Robb for her paper on "The Affiliation of Schools for Educational Purposes."

THE AFFILIATION OF TRAINING-SCHOOLS FOR NURSES FOR EDUCATIONAL PURPOSES

By MRS. HUNTER ROBB
Cleveland, Ohio

"On first thought it might seem more fitting that the subject of this paper should be presented before the Society of Superintendents of Training-Schools, inasmuch as the carrying out of such a scheme must have a direct bearing upon the work of the individual superintendents and upon the object of that society. On the other hand, a federation meeting should be an advantageous ground upon which to array affiliation forces, since a federation already accomplished not only affords a stimulus towards a further extension of the idea along lines which, although differing in kind and degree, are fundamentally similar, but also supplies experience which may be utilized in determining how this extension may be brought about.

"It is with a little hesitation that I approach a discussion of the affiliation of training-schools for nurses, knowing that the plan is fraught with many difficulties that can only be met through the united deliberations and with the common consent of such bodies as are most nearly concerned.

"The past fifteen years have found us as individuals and as associations busy over improvements in nursing conditions and the education of the nurse. On the whole, it may be said that the progress made has been steady and encouraging, but considering that we had practically a

fresh, uncultivated field in which to work, it would be little to our credit as interested, intelligent workers were we not able to point to marked improvements over our first tentative beginnings. Of course, in great undertakings fifteen years is a very small space of time, and on account of the youth of the movement our efforts have necessarily partaken largely of the experimental. Nevertheless, we may congratulate ourselves that this experimental stage has now lasted long enough to justify us in drawing a certain number of definite conclusions as to the value of the methods so far employed. Moreover, now that we are able to see just where we stand in respect to educational matters we can better realize how present conditions may be affected by the affiliation proposition.

"It is hardly necessary to mention in detail all the work we have accomplished through mutual and associated effort. Fortunately, I think that we can be reasonably certain that little or no time has been entirely lost; that so far as we have gone there is not much to regret or to wish undone, and that our efforts thus far have resulted in a great deal of general good. But recognizing the fact that all our experimental work has been a necessary preparation for development on more original and broader lines in the future, it may be well at the present time to devote a few moments to the consideration of such steps as have had a direct bearing upon the educational advancement of the members of the nursing profession.

"From the first those of us who have been intimately associated with the organization and development of nursing have recognized that very difficult and serious problems had to be met and solved if we would have nursing organization stand for something more than mere numbers,—quantity without quality,—and if we nurses were finally to qualify ourselves in deed as well as in word to enter into the full privileges accorded to members of a profession. Such privileges should presuppose certain requirements, which, broadly speaking, are three in number: first, there must be a definite educational standard; secondly, a proper professional spirit; thirdly, recognition by the public of this professional standard. To provide means for the satisfaction of these requirements has been the aim of our two great associations of nurses. From the first the Society of Superintendents has had as its primary object the educational advancement of nursing and the development of a fixed standard of education that should be common to all schools and to all nurses. On the other hand, the Associated Alumnae, while working for the general uplifting of the nurse and her work, has sought for proper protection by the law and recognition by the public. The demand to some extent for improved educational conditions for training-schools has been the outcome of the putting into practice of some of the nurses' own ideals

whereby the medical profession has been taught to expect more and better things of the nurse. Again, as we all know, the advancement in medicine and surgery calls for a greater degree of skill, knowledge, and integrity on the part of the nurse. And, lastly, we have come to recognize that no public recognition could very well be asked for unless we had some sort of an educational standard upon which to base our claims. The first general steps were comparatively simple. A minimum of two years as a standard time for the education of the student nurse was already in existence, although there were some exceptions to the rule. The division of this period into junior and senior work with schedules of classes, lectures, and demonstrations in certain subjects appropriate to each year was no great feat, although were we to-day to examine carefully into the arrangement of such schedules, into the subjects taught and the ground covered in each, and into the methods employed, we should find a great diversity, more modifications by far than was justifiable or necessary to meet the individual needs of each hospital. Next, the practice of sending the student nurse out to do nursing in private families during her time of training was by a strenuous effort on the part of both associations largely done away with, thus enabling the student to profit by systematic instruction in the hospital during the full term of two years.

"Nevertheless, we still find it cropping up insidiously under the protection of the additional third year and under the guise of an educational feature.

"But the first change of real note was the lengthening of the term of training from two to three years, until the latter period has in this country become the time generally adopted, although we cannot say it has become the universal standard, since some schools still offer courses ranging from two to two and a half years, while others have forged ahead and are requiring three and a half to four years. Nor can we say that this increase in the duration of the training has always been very advantageous from a purely educational standpoint; for it is obvious to all that while the added year of experience is of undoubted value to the student, the hospital of the two reaps the greater benefit, particularly when the nurse's hours on duty have not been shortened. Many hospitals have adopted with readiness the third year, but only here and there, in very few schools indeed, have the hours in the wards been reduced to even eight practical hours of work. To add on a whole year to the course of training and claim that it is for educational improvement is manifestly a delusion unless a fair proportion of the extra time is devoted to study alone. And we all know that the capacity for mental effort in the average person counts for little after nine or ten hours of ordinary physical work, which is entirely free from the additional nervous strain

attendant upon nursing. In respect to hours on duty, therefore, we are still far from a generally accepted educational standard.

"Again, it has been conceded that the old-time method of giving a monthly allowance to each pupil was to be deplored on the principle that it lessened the educational value of the instruction and that it was far better to give an education commensurate with the services rendered. As a result, the monthly allowance is gradually being done away with—somewhat slowly, in fact, for the system of offering a small monthly compensation or a fixed sum at the end of the term of training is still practiced in some schools which, it may be, do not feel sufficient confidence in the educational advantages they offer to lessen their chances for drawing the required number of desirable candidates by cutting off so powerful an inducement as this undoubtedly is to many good women. On the other hand, some few schools have gone even beyond the non-payment system and are requiring fixed entrance fees, ranging from twenty-five dollars to fifty dollars and one hundred dollars. In this respect, then, we are again far from a common standard.

"The subject of dietetics has received more and more attention until a practical and theoretical course of instruction in this branch of nursing is now regarded as necessary and is given in about every school. But too often we find the course is not arranged primarily from an educational standpoint, but rather is looked upon as a valuable asset in the economics of the hospital. And where shall we find any two schools that agree as to how the subject should be taught and how much time shall be devoted to it? All are so varied that no possible standard could be arrived at.

"A fresh impetus has been given to this particular branch of nursing and to that of household economics in relation to nursing by the reorganization and extension of that part of the teaching into a preliminary course of training, but in the plan of reorganization and systematization of the teaching we again find a great lack of uniformity. Preliminary courses at present range from three to four and six months, and the methods employed in the selection of subjects and in the manner of teaching them vary widely. Moreover, if the establishment of a preliminary course means that the hospital has an additional class to house and keep for from four to six months before the members enter the wards the added expense will certainly preclude the general adoption of a most valuable arrangement.

"Nor have we even an approximate standard of qualifications for the acceptance or rejection of applicants or for the dismissal of delinquent students; for a woman who may be regarded by one superintendent as an unfit probationer and is therefore refused, or a pupil who has been dismissed for reasonable cause, may promptly be accepted by another

superintendent and will ultimately be allowed to graduate. Finally the Teachers' Course in Hospital Economics has been sufficiently long in existence to prove to us that, while excellent in its way so far as it goes, it can never be the ultimate means of regulating the standard of education for nursing.

"These represent some of the principal measures that have had more or less of a trial and are familiar to most of us, as they have all been subjects for papers and discussions before the Superintendents' Society for some twelve years. And I would ask you to note the fact that whereas in almost every instance some attempt at accepting the whole or some part of some suggested improvement in methods has been made by individual schools, curiously enough in no single case has the society ever taken concentrated action, or pledged itself to the general adoption of any one form of improvement or to accept any standard so far proposed, feeling, no doubt, that such a measure would be impracticable. This means that, so far as the society is concerned, although through its efforts the general improvement has been amazing, we are as far from a generally accepted standard of education as we were in the beginning, so that we must perforce conclude under *present conditions* we can expect little, if any, more in this direction than we have already accomplished.

"The actual establishment of anything approaching a standard has been brought about by the nurses as a body through their Associated Alumnae. With the desire for legal protection and for some sort of legal recognition by the public there came at once the recognition of the imperative necessity for establishing something approaching to a common standard of education for all nurses who might seek to qualify for State registration. It became, therefore, one of the first duties of the Boards of Examiners in those States in which State registration has been legalized to prepare a standard of education for each particular State. Here at once great difficulties were encountered, and through the disability of graduates of certain schools in these States to qualify we are now brought face to face with the problem which must be solved in order to save disruption and confusion. How, then, shall we proceed to bring such schools into line for the purpose of State registration? The natural solution would seem to be through the affiliation of the various schools for educational purposes.

"But there are reasons other than these concerned with State registration which render it important that some such plan should be adopted. In the first place, in this country, at least, State registration cannot set a national standard, inasmuch as the laws governing each State differ in many respects. Furthermore, although the standard set in certain States may be all that can be reasonably desired under present condi-

tions, there is always the danger that amendments injurious to such a standard may be introduced and that in others it may be set unreasonably low to begin with. Moreover, how can any State require all its training-schools for nurses to come up to a given standard when not all of the hospitals in which schools exist are or ever can be general hospitals? Under present conditions, then, there will always remain some which will never be able to comply with the State requirements unless means are afforded them with this end in view. Such means must be first provided before any good standard can reasonably be required, and I am sure that the hospitals which are deficient would gladly avail themselves of increased facilities. When we read of what has been done in 'the best schools' the idea must surely strike us that where the sick are concerned there should be no best schools. Nevertheless, although it stands to reason that various grades of hospitals exist and must continue to exist and that all cannot afford equal opportunities for the education of nurses, it does not necessarily follow that the sick should be less efficiently cared for in one kind of hospital than in the other, provided that the women who wish to become nurses are supplied with equal advantages for rendering themselves competent. Our aim and desire, then, should be to establish a good uniform education for all nurses in every State and in all hospitals. Some system must be elaborated whereby we may obtain this uniform education, and until this is accomplished our sympathies must lie with the hospitals of limited opportunities.

"As a matter of fact, to my knowledge no hospital now exists at present where such a uniform education can be acquired. In matters of general training the large general hospital offers the larger field for experience than could be found in a similar institution of smaller capacity. Of course, the special hospitals do not offer scope enough, but when it comes to a definition of a full general training then it is equally true that the large general hospital must look to other sources for supplying a training in certain branches to round off its course. If, then, we set up as a standard a full general training, we must admit that neither the large nor the small hospital is complete enough to be quite independent, and that for lack of system, proper organization, and affiliation students in every hospital are every day losing valuable practical experience in different branches of nursing. We have given the independent method of carrying on training-schools a fair trial, and our results have proved deficient. Each school has gone its own way, apparently indifferent to or careless of the well-being of the whole. Fortunately, however, this 'I am superior and better than my neighbor' attitude has been in a great measure only in the seeming. We know that a very different spirit exists, and that, although not always openly

expressed, the hearty desire for the general betterment has a real existence. Hospital authorities and superintendents of training-schools have done to the best of their ability, and have utilised approximately to the limit the possibilities of the system under which they have been hampered and under which they have had to work. The main limitation is based upon the fundamental fact that from the educational standpoint the relation of the training-school to the hospital has always been an impossible one. With our present system the hospital work has always come first, and the nurses' education has been relegated to a secondary position. The system is responsible for the fact that undesirable candidates are frequently accepted, because the work of the hospital must go on whether the proper standard of nursing is maintained or not, even at the risk of forfeiting the best results for the hospital as well as the highest excellence for the nurse. In this, as in most other instances, superintendents of schools have been powerless to do more than they have already done.

"In no instance has a training-school for nurses been founded primarily as an educational institution; it has always been regarded as an appendage to a hospital. But until this is changed and schools for nurses are founded for the primary purpose of educating women in nursing—the hospital being utilised as the ground for gaining practical experience—we can scarcely hope for any uniformity among nurses or for the highest grade of work for the hospital or the sick. The best medical schools now stand on this basis and the results are more and more gratifying. How can schools for nurses be established on a similar basis? Even at the present day I believe this end may be largely accomplished by a proper affiliation of the schools which now exist.

"The subject of affiliation is not a new one with us, for the existence of difficult problems connected with the bringing of the small general and specialty hospital into line for educational purposes was recognized years ago. My paper on 'Nursing in Small General and Specialty Hospitals,' read before the Society of Superintendents in 1897, would seem not to be out of date even at the present, and to a certain extent might still be employed to supplement the present one. In it I explained in detail the need for a general nursing standard and for coöperation of larger with smaller hospitals. Coöperative nursing was tried as early as 1888, when the Illinois Training-School of Chicago undertook for a given sum the entire nursing of the Presbyterian Hospital of that city. This arrangement was made with the object of supplying a training for the students of the Illinois Training-School in the care of private ward patients, and of doing away with the necessity of sending pupil nurses out to private duty. At the same time it did

away with the small training-school attached to the Presbyterian Hospital for the reason that the opportunities were limited to certain kinds of nursing and the training was inadequate. This was my first experience in coöperative nursing, but ever since I have been a firm believer in some such plan as the ultimate basis of training for all schools. Since that time more or less coöperative nursing has been attempted. At one time in Milwaukee a central school had under its charge as many as nine hospitals, and within the past three or four years quite a long list of schools could be named that have coöperated, usually with the view of supplementing some branch of training that was lacking. How permanent these later efforts at coöperation may be remains to be seen. Such experiments, however, were always heretofore short lived, and without going accurately into statistics I may say that the majority of these earlier attempts sooner or later ended in disruption. The arrangement made by the Illinois Training-School lasted perhaps longer than any other, some fifteen years elapsing before its final withdrawal from its nursing relations with the Presbyterian Hospital. An account of the many causes for the failure of this plan of nursing would be too lengthy to give here and would not be particularly to the point, but one chief impediment to its success and general adoption lies in the difficulty of adapting the methods of one school to those of another without too much repetition and loss of time and some friction. Were there one generally recognized standard, the same curriculum, and only certain definite teaching required of each school so affiliated, these objections would not hold to the same extent. That coöperative nursing thus far has not proved an unqualified success is not surprising. That any degree of success has been attained is extraordinary for the reason that the plan was not started on the right basis. The added experience of years has taught that the chief obstacle lies in the fact that the necessary stability is lacking in that those most nearly concerned have never been afforded proper representation in the administration of the coöperative plan. The balance of power usually centred in the school that contracted to do all the nursing or to provide a certain branch of training for another hospital. The hospital thus cared for after the financial consideration had been agreed upon had practically no voice in the choice of the methods to be employed in the nursing. With our love for the personal note, it is only natural that each superintendent of nurses and each hospital should wish to have a voice in the arrangements for the education of one's own students and in the administration of so important a department of the hospital as that of nursing.

"Such considerations and others of equal importance must therefore be borne in mind. In endeavoring, then, to arrange for the affilia-

tion of training-schools I would advocate the establishment of central institutes in each State offering a comprehensive theoretical and practical training in general nursing. Such institutes would be independent of any particular hospital, but would be organized and administered through a central committee composed of the proper representatives from the hospitals and schools entering into the affiliation. The proper representatives would be chosen from among those most nearly concerned in the welfare of each hospital—namely, the trustees of the hospital, the medical staff, the superintendent of the hospital, and the principal of the training-school. A proper selection of this board is the first essential, for with the best intentions in the world no outside element could fully understand or successfully deal with the particular needs and conditions belonging to the education of nurses. From these several sources a properly balanced committee on training-school affairs should be selected, such committees combined forming the central committee of the central nursing institute. The institute, be it distinctly understood, would have to do not only with preliminary courses in connection with the preparation of candidates, but would be responsible for the entire education in general nursing of accepted candidates. Upon this central committee would devolve the fixing of a standard of general training, the preparation of a general curriculum, the selection of lecturers, instructors, and inspectors, the determination of a plan of rotation from one hospital to another, the definite ground to be covered in each hospital, and the management of the finances of the institute. This central committee would be divided into the necessary sub-committees, among which might be mentioned the Committee on Finance and the committee dealing with the admission of probationers, inasmuch as all applicants to any school in affiliation would be referred to the central institute for acceptance or rejection. Such a committee would naturally be composed of the principals of the affiliated training-schools. In order to take in all the hospitals in a large or populous State, the establishment of two or more such institutes might be necessary, but all would be organized on the same basis and all examinations would be held at the same time all over the State. All diplomas would issue from the nursing institute and not from any one hospital.

“Broadly speaking, in arriving at a standard of training it would be necessary to decide upon the requirements for entrance and the length of the preliminary course and of the course of training, and the subjects required to be taught and practised, and the arrangement of the curriculum for the several years. Each central institute would provide a set of regular lectures and a course of instruction. The head of the institute might also under the direction of the central committee act as

inspector of the several affiliated training-schools. The various hospitals would be arranged into groups in such a way that each group would provide a full course of training. The method of distributing the students to each of such groups would also have to be arranged. The Finance Committee would deal with endowments, scholarships, fees, lectures, and instructors' salaries, the pooling of the expenses, and the like. These and many other matters present problems which are of vital importance, and which must be satisfactorily dealt with before affiliation can attain even a measure of success. In the present paper they cannot be dealt with in detail.

"The advantages of a successful affiliation would be manifold. First and foremost, the establishment of the much to be desired standard could be brought about, and in all forms of hospitals the nursing would be uniform, this uniformity rendering State registration comparatively easy to attain. Moreover, the sick in our hospitals and homes could feel assured of better nursing. The preliminary course would be assured to all students without additional cost to the individual hospital. The arrangement would also tend largely towards economy, since much repetition would be saved and the number of instructors and lecturers would be minimized. Being primarily educational, the course of training would attract a more uniformly desirable class of women. Again, the superintendents of the training-schools would be relieved of much clerical work and saved many interruptions. They would individually be relieved of the selection and care of probationers, and would thus be enabled to systematize their time better and to spend more of it in the wards, where their powers of observation, teaching, and influence are of so much practical value.

"The whole aim of the central institute should be towards thoroughness and the production of quality rather than quantity. It should, therefore, in addition to the undergraduate education, provide post-graduate courses in general nursing and a special course in every special form of nursing that is allied with medicine. All such courses must be thorough. Three years should be a sufficient time in which to cover the course in general training, and if a woman is to spend more than three years in learning to be a nurse the extra time, over and above the three prescribed years, should be devoted to optional work and special training in some particular branch of nursing for which a student has shown a particular aptitude. At the present day in the world's work there is a general tendency towards coöperation—towards the formation of trusts if you will—and towards specialization of a high order in all branches. For it stands to reason that after a thorough general groundwork has been laid, the individual who selects a particular branch from natural

taste, inclination, and adaptability is bound to carry that branch to a higher degree of excellence and gain better results than is possible when the energy is diffused over a wide field. As in medicine, so in nursing, the specialist is bound to come more and more into evidence, and nursing work must naturally be subdivided. Already we find distinct specialists in our midst—the district nurse, the army nurse, the superintendent of the general hospital and training-school, the superintendent of the special hospital—for children, for contagious diseases, for obstetrics, for tuberculosis, for nervous diseases and insanity. Add to these the instructor in dietetics, the sanitary inspector, the school nurse, the masseuse, and we have already a goodly list that need special methods for their proper preparation, other than those that have formed a necessary part of the training in general nursing. But so far as the central institute is concerned, only those subjects that pertain primarily to the nursing of disease should find their place in the general curriculum. The specialties must fall into subdivisions and groups, standing for certain objects. Thus district nursing includes more than the nursing of the sick poor; it deals with a branch of social economics in which the nursing itself takes a secondary place, the nurse serving as an instructor in the art of right living and the maintenance of health. Such a specialty, although it requires as a general basis the course in general nursing, calls for a knowledge of certain social conditions that could not possibly be treated properly during the ordinary course of training. Again, as regards the making of superintendents and instructors, only here and there do we meet with a woman who shows the natural executive ability to manage large affairs in a business-like way, or who possesses the faculty of imparting knowledge to others in a clear manner; and only those who can profit by them should have the larger and special opportunities for developing this natural gift.

"Nor is it necessary that provision for every form of teaching should be supplied by the centralized school when by means of affiliation with institutions dealing with other forms of work we can obtain what is particularly needed to supplement our own teaching. For example, for teachers' work a nurse might take a prescribed course in Teachers College, New York, for social work a course in the School of Philanthropy, Boston, or similar institutions.

"Our great trouble has been that seeing all these many fields of usefulness ready for nurses and needing workers, for want of a proper system and classification we have frantically tried to add on a little instruction in each to the list belonging to the general nursing curriculum, with the result that no one of them is dealt with thoroughly, and that the special student is unsatisfied, and the general student has one

additional burden to carry. If we are willing to reorganize our training-schools on the basis of a general theoretical and practical education that will embrace all hospitals and all subjects pertaining to the care of the sick and rigidly relegate all other subjects to their proper place as specialties to be taken up only by the women who have the natural ability and taste for them, we shall in the course of time reap some very satisfactory results in both the general nursing and the specialties. And to-day no better methods suggest themselves to my mind than those which could be provided through the affiliation of all hospitals for nursing purposes on some such basis as I have endeavored to present to you."

MISS NUTTING.—We have listened to a grouping together of thoughts and ideas and plans, some of which are entirely new to many of you here present, some of them have come to the mind of one person, some to another, but all are here first presented in a concrete and concise form. To listen to this and to think of the possible outcome sounds as if we were preparing to usher in the Millennium. Meanwhile, we have come back to the present condition and deal with that, and it may be a help if those here present who have in the course of their work benefited by any such affiliations as has been suggested will give us the benefit of their experience. The accumulation of the small benefits is what will ultimately make possible the greater ones. This paper is open for discussion or for question.

MISS McMILLAN.—For some time I have felt that until our schools are outside of general hospitals we cannot solve these problems which we have. I very heartily endorse Mrs. Robb's ideas. Would it not be possible for us to take some definite action this year and begin towards that end?

MISS NUTTING.—Those who have had experience in the two kinds of training-schools,—the training-schools which are under hospital government and those which are under outside government,—might add to this.

MISS McKECHNIE.—I might tell of my experience with a school that was independent and affiliated with a general hospital; the hospital was a city hospital, and at the end of each year the contract should be renewed with this hospital. The contract called for a certain number of pupils to do the work in the hospital wards, and the allowance was paid back to the endowment fund of the school. This had gone on for a number of years, but eventually was deferred and deferred because no satisfactory contract could be made that would be an undoubted advantage to the schools. There were not enough nurses to do the work and there was not enough money coming into the school, and money was the stumbling-block, and the school failed to complete its contract at the end of another year, and it was obliged to withdraw from the hospital, and the school was abandoned. The conclusions I think one might come to, perhaps more especially with a hospital that was under political control, is the necessity of having public officials understand the education from the standpoint of a nurse, and what the school was struggling for it seemed impossible to obtain.

MISS NUTTING.—Then it was not the system that was at fault, but the education of the public.

MISS McKECHNIE.—The system was all right, as Mrs. Robb has said, but

these questions had not solved themselves and were not so apparent to the management as they are now.

MISS MCISAAC.—As one having a long experience in affiliation of that kind, I would like to bear out what Miss McKeehan has said, and that is that money is the great obstacle. The Illinois Training-School did for fifteen years care for two large hospitals, and the greatest difficulty we experienced was the subject of money; the school has control of a large city or county hospital, as it is called in Chicago, and there is the yearly frame about the contract. In this instance it has always been renewed, and while there have been annual difficulties, still, they have been overcome, and in a way satisfactorily. A school that is independent of the hospital government has a great many advantages which a school under hospital control has not. One as a superintendent or manager of the school has much more power in the education of the nurses and can do a great many things in which one would be restricted under the government of the hospital, but only until the system is elaborated in a way which Mrs. Robb has outlined and an institution of that kind recognized, can affiliation ever be carried out to the full and in a satisfactory way. I believe in it thoroughly; I have seen its practical work and still believe in it, and when it is arrived at in the way suggested I believe it will be our salvation.

DR. BANNISTER.—I have been a superintendent and I can add a word or two to what has been already said, that the question is largely a financial one, and also as to the renewing of the contracts at the end of the year. We had eight or nine hospitals, and the training-school was independent of any of them, so, of course, to do the nursing for these hospitals we had to have a great many nurses, and if we got an additional hospital it would require additional nurses. We had difficulties all the time, and we had always that anxiety at the end of the year as to whether all the contracts would be renewed or whether we were going to have half of our nurses on our hands, and we found that the public and even the hospital officials themselves were not in any way interested in the education of the nurse. The thing that they really thought the most of and the reason they allowed us to do their work was because it was cheaper for them than it would have been to do it themselves, and in a year's time they found that by some little inducement they might save probably a very small amount. They would then not make a contract for the next year, so in that way, while we gave our nurses a better training and the school a better training and did the work very well and increased the number of our nurses, when I left it the failure to renew a great many of these contracts caused both the system and the institution to die out.

MISS NUTTING.—Through all this one idea continually presents itself, and that is that the expense looms up very high. It seems impossible to accept the idea of expense in connection with the training of nurses from an educational standpoint. In the two preceding meetings an appreciation of that point has been dwelt upon as a very great necessity. I would like to add that I think the good influence of that affiliation in Milwaukee still remains, for I am quite sure I heard recently of an affiliation of schools for educational purposes still existing in Milwaukee.

MISS NEVINS.—I think one fact which all three speakers raised, apart from the educational standpoint, is the fact of the education still having to go on at the hands of nurses.

MISS PALMER.—I want to ask Mrs. Robb how she proposes to pay for the extra cost of nursing; is the pupil nurse to pay for it?

Miss. Ross.—That is one of the details that I think should be settled by the central committee. Of course, this paper is simply the first thoughts; there are many still to be added; it was impossible in twenty minutes or half-hour's paper to move than suggest, but it is a subject, I think, which really calls for several more papers before we will have a comprehensive understanding of it. The subject of finances is one which naturally belongs to the central committee, but I will say that in suggesting and making up the committee I purposely put on the central committee representation from the trustees of the hospital because they are the ones, I think, who should assume the financial responsibility.

Miss MAXWELL.—Dr. S. Weir Mitchell says that if we are to make nursing a profession we will have to put it on educational lines, and in order to put it on educational lines we must charge for admission to our training-schools and make all pay for what they get.

Miss. Ross.—Of course, the object in presenting this paper to-day is not only because the subject very closely affects the superintendents' work, but because I feel that if you think there is anything worth considering in it, it is necessary that some steps should be taken, such as a committee appointed.

Miss NUTTINS.—Could there be any better time in which to appoint a committee than when the two societies are gathered together to confer and the result of the combined wisdom can be obtained. The suggestion has already been made that some steps should follow.

Miss McMILLAN.—I move that the president be authorized to appoint a committee to take up this matter.

Seconded by Miss Maxwell. Carried.

Miss NUTTINS.—There seems to be nothing further to add to this discussion, so we will proceed at once as rapidly as possible to the business part of our meeting, which will be brief. Being at once chairman and acting secretary of this society, it devolves upon me to read a short paper which Miss Dock would present if she were here. When the question arose last fall of the affiliation of this body with the International Council of Nurses a letter was written from that body and sent here; it was placed in THE AMERICAN JOURNAL OF NURSING, and it was also sent to every member of the councils of the two societies. The councillors have done what was possible to do, but realizing that the opportunity for a meeting together here to-day was a very unusual one, we took advantage of it in order that every graduate present might have the privilege of recording her own vote for whatever form the continuation of this society might take and for its relationship with the societies of other countries. Before doing anything in a business way, it was deemed better to give a very brief history of international relationships in order that you may all know exactly what the American Federation of Nurses is and what it means.

INTERNATIONAL RELATIONSHIPS

By L. L. DOCK

Honorary Secretary International Council of Nurses

"It is now five years since the Congress in London took place, at which time the first suggestions for an international union of trained nurses were made to the nurses there present. For the benefit of any to-day present who may not have followed all the incidents and reports,

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I may very briefly run over the most important details and show where we stand to-day as to international relationships and what, so far as we can see, are the prospects before us.

"The group of American nurses who went to the London Congress all went, as it were, hap-hazard, either because they happened to be in England or because they were personally interested and curious to see what a great congress of women would be like. The Nursing Section, which had been made a part of the programme at Mrs. Fenwick's instance, was something quite new in women's gatherings, had attracted little or no attention in our American organizations, none of which had official delegates there to represent them, and had a somewhat informal programme. Nevertheless, it was of so much interest and was to the nurses present so stimulating, that—the spirit of organization being in the air of the great gatherings of women—the suggestion, first made by Mrs. May Wright Sewall, that nurses also organize internationally, was received with enthusiasm. A Provisional Committee was formed to draft a constitution, and this constitution was sent around and was accepted, and the members of the Provisional Committee, with others whom they called upon to aid them, became for the time being the International Council of Nurses. The idea, of course, was that the council should eventually be composed of national societies, each society representing one country, but the fact that at that moment no country but our own was well organized did not discourage the individual members, for they believed that the formation of an international council might help to stimulate organization in other lands. We had in America our two societies, the Superintendents' and the Alumnae, and, in order to be able to consider them as one, Mrs. Sewall, who is a genius at organization, suggested that we affiliate them under the simplest possible form, so as to leave each one quite as it was, only making it possible for them to be regarded as one and to act as one for such special purposes as might seem desirable, the main purpose being to have one representative body ready to unite in friendly relations with national societies in other countries.

"In order to have the privileges of membership in the great congresses of women meeting every five years, and which are formed by the National Councils of Women of each country, we joined the National Council of Women of the United States, entering it as the American Federation of Nurses, which we created quite informally, without a written constitution and almost without rules, simply by the adopted motions of the Superintendents' and Alumnae Associations, to the effect that they would unite in paying the dues to the Council of Women, and would each appoint two members, and that these four members should

choose a fifth, who should act as the chairman and president of the Federation of Nurses. In this simple fashion we have carried it on since then without any trouble, and as the whole international situation was hardly in the budding stage—one might say only a seedling—it has answered so far very well.

"But the time has now come—or will soon come—when we shall possibly find it easier to progress if we have a rather more definite form.

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"The London Congress was held in 1899, and in 1901, still only consisting of individual members, the International Council of Nurses suggested a Congress of Nurses at Buffalo, which you all remember and which was a really great event in the nursing world. The Berlin Congress of Women last year gave the subject of nursing education a position of prominence, the largest assembly hall being devoted to the subject during one day's session, while a second smaller hall held a session upon district nursing and related subjects. This interest was largely due to the acute circumstances in German nursing, which have induced the German National Council of Women to take up the support of the modern nursing movement with great earnestness. However, the German conditions did not monopolize the field, but most generous opportunity was given, especially to the English and American nurses, to describe their conditions and to give their reasons for supporting the principles of a broader education for nurses.

"As to nursing organization, we had also our own separate day and place in Berlin, where the formal proceedings of the International Council of Nurses (still consisting only of individuals) were conducted under its constitution. We learned there that England, since the Buffalo Congress, had been organizing nurses with great energy on lines similar to our alumnae associations (called in England leagues), and that these leagues had formed a Provisional Committee, looking forward to the definite formation of a national society and affiliation with the International Council. We also found that Germany, quite independently of outside influence (for they had heretofore known nothing of foreign nursing organizations), and entirely as the result of irresistible modern conditions, had formed a national association called the German Nurses' Association, now consisting of over six hundred members and growing daily, which is entirely self-governing, organized and conducted exactly like our own, and having the same purposes and ideals.

"At the Berlin meeting formal invitations were given to the English and German associations to join the International Council, and both have accepted. At the next regular meeting in Canada in 1909 we shall have official delegates from these societies, and, we hope, from the American Federation. The question of suitable and not too burdensome dues

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will then be discussed and settled as an amendment to our present international constitution, and plans for an international campaign for the great general movement towards self-development, broader education, and progressive ethics will be outlined. I feel that some account of the difficulties of our foreign sisters might be in place here for the benefit of those who have not given much attention to the subject, yet to try to enter into details would exhaust your time and might also give very erroneous impressions. I will only remind you, therefore, that whereas we in America have only an educational problem,—that is, a single-faced problem,—the pioneers of modern nursing in Europe have a four-fold opposition to overcome.

"First, the religious prejudices.

"It has been and will long continue to be a bitter struggle to secure the right of nursing to be 'unconfessional' or independent of religious orders. And let it not be overlooked that this is not alone a lofty spiritual domination. It has a solid financial basis in that all orders control entirely the earnings of their nurses.

"Second, social prejudices.

"The class distinctions which have existed in most European countries have worked serious detriment to the growth of ideas necessary for the progress of nurses, and have hampered and do still hamper forward movements. The more rigid these distinctions, the more injurious is the prejudice.

"Definite unfavorable results of social prejudices that may be mentioned in a general way are: (1) the long established usage in many places of having two distinct classes of nurses—one a higher grade, monopolizing positions of authority by virtue of their class; one a lower grade, largely recruited from the peasants and domestic servant ranks, doing the hardest work, being accorded no respect, and existing as a dead weight in the educational problem and in the movement towards self-government; (2) a feeling of contempt, not for work as such, but for work done for money, and especially for nursing work followed as a means of livelihood. This, with its concomitant of patronage and benevolence, has made the struggle of the individual towards self-respecting independence doubly hard.

"Third, masculine prejudice.

"It is unnecessary to dilate upon this point. I would only like to say that in no country of the world, unless perhaps New Zealand and Australia, are men in general so fair to women, and the medical professional in particular so generous and so brotherly towards nurses, as in America.

"While you may all think you know some exceptions or have some

grievances, I can assure you they are insignificant. I have made many scientific investigations upon this subject, and have collected much valuable data.

"Fourth, industrial prejudice.

"This is, of all, in many countries, the easiest to overcome, yet it also has not a few difficulties, and these are now especially striking in England. You are all familiar with the situation there, but may not all realize that at bottom it is largely an industrial prejudice, I might say, industrial superstition, that is opposing State registration. This, to my mind, is made clear by an editorial in the *Lancet* of January 7, 1905, which speaks of the nurses' bills as containing the objectionable feature of 'Labor with a capital L;' says that any proposition to register nurses which carries with it the semblance of a trade-union must be doomed to fail, and speaks of 'the fear that the registration movement might be used to safeguard the interests of the employed against the employer.'

"If these words mean anything, they mean that there is a sordid fear of allowing nurses to work for reforms through their own associations.

"Meantime, the organized nurses of Great Britain and Ireland, of whom there are now many hundreds, are carrying forward a campaign of education with intelligence, courage, and determination, such as must command our respect and deepest sympathy.

"Thus these four lions lie in the path of our over-sea sisters. In one country one will be found more prominent, in another, another, but in every country they are all present to some extent and in varying proportions. In the next five years among Continental countries it is likely that Germany and France will make the most progress. The whole drift of tendencies shows it, and in Germany, in Sister Agnes Karll the new movement has a leader of rare qualities, who has the genius of winning friends and of making converts.

"In France, as many of you know, a most dramatic movement is going on. The city government of Paris, with the best intentions in the world but with little practical knowledge, has for years been trying to educate wholesale a modern nursing staff. Three or four years ago the hospital department of Paris applied to the Charity Organization Society of New York City for printed material relating to training-school organization in America, and the writer collected this material for the society, including many of your prospectuses, study courses, rules, working plans, printed reports, Superintendents' Society and Alumnae Reports, etc., etc., all of which was sent to them. They have also studied the nursing system of England, and this especially with renewed zeal

and admiration in the last year or two. Through the work of Dr. Anna Hamilton in Bordeaux and Madame Alphen-Salvador in Paris they now have object-lessons of what a nursing staff ought to be and how it ought to be trained. They now realize that they need the help of women with authority, and in the past year an English nurse, Miss Wortabet, has been called to coöperate with the Paris officials in reorganization work.

"In Italy a Johns Hopkins nurse, Miss Baxter, has worked for nine years under great difficulties, and has succeeded in making a success of the first regular training-school in Italy. She now has thirty-five graduates, educated women trained in modern methods, and Miss Turton and Signora Celli, of whom you may have read in the *JOURNAL*, are also continuous in efforts towards reforms.

"In Holland there are two associations, one rather conservative, composed of nurses, physicians, and hospital Governing Boards (admired of our friend, Dr. Worcester) and a national association of nurses. The latter society, which also numbers among its members some of the more radical physicians, who are outspoken in advocating a higher educational standard for women, is in sympathy with the ideals of the International Council of Nurses, and is ready for membership. There is also a Matrons' Council in Holland, corresponding to our Superintendents' Society. Educational questions are much to the fore in Holland.

"In Denmark there is a national association of nurses quite conservatively managed. So far it has taken no notice of international movements and seems not to have any special problems. Denmark seems a happy little country where everyone is well off and with nothing much to worry them.

"(These little pictures of mine are naturally to be taken as sketches, and not as photographs.)

"I have not spoken of Australia and New Zealand because their conditions are not greatly different from our own. They are in some respects more advanced than we, and are well fitted to act as counsellors and friends to the pioneers of new movements of older lands.

"Now if it is asked, 'What advantage from international organization?' one must answer, it is probably true that the great rank and file will never be directly conscious of direct benefit. But the leaders, who are working for the rank and file, will realize the benefits to the full, and do so already. In every country there is a little group, sometimes of two or three, sometimes only one, who are carrying the whole burden. To these international union will be an inestimable help. Simply the consciousness of being understood and sympathized with is an encourage-

ment, and the knowledge of not struggling alone, but that others are making the same efforts, gives renewed strength.

"As to whether we can carry membership in an international association of our own and also in the National Council of Women is a question. It must be admitted that the National Council of Women in the United States is not as effective and purposeful an organization as those of other countries. I am also surprised to find how disproportionately high are its dues.

"The German Nurses' Association pays five dollars yearly for membership in the German National Council of Women. The English dues are about the same. Ours are more than six times as much. True, everything in America costs more, but not six times more.

"It is also true that the National Council of Women makes many demands upon the time and strength of our officers which these busy women are not able to meet. Neither do these demands seem to be of as much definite importance as their own nursing work.

"Time has not shown that we are of any real usefulness in the National Council of Women, whereas we can be definitely helpful and useful in an international union of our own colleagues. Personally I feel that this membership has been of great benefit to us in enabling us to come into relation with nurses of other countries, and in giving us a status in the great Congresses of Women. If we could do everything, I would gladly see our membership continued just for this reason. But the impossibility of doing everything compels a choice sometimes, and if one has to be made, I feel that our nurses' international association is much more important.

"I might mention now that an informal meeting of the International Council of Nurses in Paris in the summer of 1907 is under consideration, not for business or regular transactions, as such can only occur every five years according to our constitution, but for conferences, papers, and discussion. It is thought that an interim gathering would be of great interest and benefit, and that the cost of a meeting-place could be defrayed by admission fee, with, perhaps, some small contributions from benevolent nursing associations. So, brush up your French and lay your plans.

"And now my best wishes for the results of your conferences."

MISS NUTTINE.—We have, then, first to consider the invitation of the International Council of Nurses to the American Federation of Nurses to affiliate with that body. This invitation, already expressed through the pages of your JOURNAL and already sent to the members individually of both societies, is now before you.

Miss DROWN.—I move, first, that the American Federation of Nurses withdraw its membership in the National Council of Women of the United States.

Seconded by Miss Giles and Miss Maxwell and carried.

Miss NUTTING.—The next question is the one which was brought up a moment ago, and that is the acceptance of the invitation of the International Council of Nurses to the American Federation of Nurses to affiliate with that body.

Miss SAMUEL.—I move that the American Federation of Nurses accept the invitation to affiliate with the International Council of Nurses.

Seconded by Mrs. Quintard and carried.

Miss NUTTING.—There is one other matter, and that is the fact already referred to that we have had no form of government, and that a loosely organized thing is very liable to fall to pieces if there is not something to bind it together. Therefore, those who have been considering the matter felt that the very simplest and briefest form of a constitution should be adopted by the Federation, and such a form of constitution has been drawn up to present to you to-day. The question is, shall it be presented?

Miss McISAAC.—I move that the constitution as prepared be presented to the society.

Seconded by Miss Goodrich.

Miss Nutting read the constitution as prepared.

PROPOSED CONSTITUTION FOR THE AMERICAN FEDERATION OF NURSES

"I. The name of this body shall be the 'American Federation of Nurses.'

"II. Its purpose shall be to enter into organized relations with national councils or associations of nurses in other countries.

"III. Its officers shall be the active officers of the American Society of Superintendents of Training-Schools for Nurses, and of the Nurses' Associated Alumnae, and of any other affiliated association. They shall choose their own chairman, to be known as president of the American Federation of Nurses, a secretary, and a treasurer, and shall appoint such committees and sub-committees as are necessary.

"IV. The duties of officers shall be to do all that is necessary in maintaining and developing organized relations with nurses of other countries, and to act upon all matters referred to the Federation by the affiliating societies.

"V. The fees of each affiliating society shall be fifteen dollars a year, payable on September 1."

Miss McISAAC.—I move that the constitution be accepted as read.

Seconded by Miss Goodrich and carried.

Mrs. ROSS.—I want to say just one more word in regard to my paper. I may not be broad-minded enough, but it did seem to me that when I was preparing my paper that it properly belonged to the Society of Superintendents, because while we all are interested as a profession in the results of affiliation,

it seems to me that the actual work, the actual taking in hand, lies with the Society of Superintendents, whose object in their constitution so definitely deals with educational problems.

MISS DAVIS.—Might I ask, then, that if this committee that is to be formed should be formed by the Superintendents' Society or from this affiliated society?

Mrs. ROSS.—I had just one other idea about it. The Society of Superintendents has already a Committee on Education, and I thought possibly you might in some way refer it to that committee.

MISS DAVIS.—I thought that you took a vote and that a committee should be appointed here to-day from this society and look into this matter further.

MISS NUTTING.—Such a motion has been made and voted upon and a committee is to be appointed by the president of this association for that purpose, but I believe that there is nothing so rigid or no vote that cannot be reconsidered by the people who have already made it.

Mrs. ROSS.—May I ask how often this society is to meet?

MISS NUTTING.—The American Federation of Nurses meets when the International Council of Nurses meets, once in five years. I am quite clear that it would be constitutional for this society to reconsider at the present meeting any vote or resolution adopted.

MISS McMILLAN.—I move that we reconsider the vote as to the president appointing a committee to consider an international scheme of education.

Seconded by Miss Isaac and lost.

MISS McKECHNIE.—In view of the struggles of the English nurses in obtaining recognition in their own country, I would like to make a motion that this association of the American Federation of Nurses extend to the British nurses some expressions of sympathy in their struggle for freedom and their efforts at legalized protection by the State. It is as follows:

"WHEREAS, British nurses in their struggle for independence and legalized State protection have won the admiration and sympathy of all American nurses by their courageous, dignified, and continued efforts; therefore be it

"Resolved, That the American Federation of Nurses, constituting as it does the result of the united efforts of women in this country, extend to them our sincere sympathy and the assurance of our expectation of their ultimate success.

"MARY W. McKECHNIE, Charter Member, Superintendents' Society.

"MARY M. RIDDLE, President Associated Alumnae.

"SOPHIA F. PALMER, Editor THE AMERICAN JOURNAL OF NURSING."

Seconded by Miss Greenwood and unanimously carried.

MISS ALLINE.—I take pleasure in presenting to you the resolution prepared by the committee appointed at the meeting last evening:

"WHEREAS, The purity of the food consumed is a vital question of the physical well-being of humanity; and

"WHEREAS, Our primary consideration is the prevention, as well as the alleviation, of suffering; and

"WHEREAS, The International Pure Food Association is striving for legal enactment to control the adulteration and misbranding of all products intended for human consumption; therefore, be it

"Resolved, That the American Federation of Nurses assembled in Wash-

ington, this third day of May, 1906, hereby record their endorsement of such action.

"ANNA L. ALLINE, Chairman, Instructor in Hospital Economics, Teachers College, Columbia University, New York,

"LUCE L. DROWN, Superintendent of Nurses, Boston City Hospital, Boston, Mass.,

"SOPHIA F. PALMER, Editor THE AMERICAN JOURNAL OF NURSING, 247 Brunswick Street, Rochester, N. Y.,

"Committee on Resolutions."

On motion of Miss Dolliver, this resolution was adopted.

Miss NUTTING.—Now I will ask you to remain a few moments, probably not more than two or three, while Miss McIsaac, the president of the Board of Directors of THE AMERICAN JOURNAL OF NURSING, says a few words to you about that JOURNAL, and before she does I would like to state that in a recent English paper the JOURNAL OF NURSING was very favorably commented on, and it was stated that it was probably the best edited professional journal of any kind in the world.

Miss CARR.—I move that this association of the two united societies here present extend its congratulations and vote of thanks to Mrs. Robb for the long, unwearying work she has given in behalf of both societies generally.

Seconded by Miss Goodrich and carried.

Mrs. ROBB.—I must just say a few words of response and thanks for this generous and unexpected appreciation of any work that I may have done. I can only just say this to you, that we are only as strong as our weakest link, and at the first meeting of the Associated Alumnae Miss Dolliver said that it depended upon the effort of every single member as to how strong, how forceful, we might be in our association. I can assure you I have not any special ability to boast of; I wish I might have; I feel the limitations of it all the time, but I have humbly tried to give my single effort towards the betterment of the whole condition, and that is all anyone of us can do.

Miss McISAAC.—I would like to move a resolution of cordial thanks to the one who has done double duty for both societies this week, I mean Miss Nevins.

Seconded by Miss Palmer and carried.

Miss NUTTING.—I have extreme pleasure in putting that before you. No one knows but those who have been closely connected with her for the past few months and have seen what it means to have in hand the preparation for two conventions what work she has done; she deserves your most hearty thanks as president of the one and as chairman of the Programme Committee of the other. Those who thank Miss Nevins will please do it by rising.

Vote unanimous.

Miss McISAAC.—I just want one minute to speak about the JOURNAL. I want to say that these two societies, which are now one, have an official organ,—I think some of you don't know it,—and that organ is THE AMERICAN JOURNAL OF NURSING, and we have made provision so that you may have an opportunity to subscribe for it if you have not already done so. We have a representative here, and you may all of you subscribe if you have not already done so.

MISS MAXWELL—I have been selected to present the needs of Miss Hibbard at Panama. Miss Hibbard is in charge of the nurses there and has requested me to interest you nurses in sending to her authorized nurses of good quality and fitted to undertake the work there in a satisfactory way. She would like to have them certified to by our superintendents or members of the Associated Alumnae. I believe the civil service examination is soon to come into effect, and she hopes that the good nurses who can be recommended in this part of the country can go before that is made absolute. She begs me to say that now they pay sixty dollars instead of fifty dollars for services in that department, and she would like very much the help of both societies in that work.

Mrs. Robb took the chair.

MISS CARR—I move that we place a resolution before the house of a vote of thanks to Miss Nutting.

Seconded by Miss Melsae and carried unanimously.

Meeting declared adjourned.



NOTES FROM THE MEDICAL PRESS

IN CHARGE OF

ELIZABETH ROBINSON SCOVIL



DANGERS OF THE TOURNIQUET.—The *Journal of the American Medical Association* in a synopsis of an article in *Nordisches medicinisches Archiv*, Stockholm, says: "Ahlberg relates three instances of serious injury resulting from the application of the Esmarch bandage to arrest hemorrhage after an accident. In one case the tourniquet had been applied very tightly and left for a day and a half above the severed brachial artery. There had been considerable hemorrhage and the patient, a robust young man, soon succumbed. The fatality may have been due to the acute anemia alone, but there is a possibility that the products of decomposition after ligation of the artery may have induced intoxication of the organism, already enfeebled by the anemia, when the constriction was removed. The tourniquet should never be left long, but should be removed at the earliest possible moment. It should be applied as close to the wound as possible. In two of his cases the limb had to be amputated at a much higher point than would have been required by the trauma alone. It should be more generally emphasized that all the parts below a tourniquet left for more than three hours are exposed to the great danger of tissue death. Another important point to be borne in mind is that the injured part should have all the cleansing manipulations done before the tourniquet is removed. It prevents foreign matters and fluid from being sucked into the circulation, and consequently they should all be cleaned off before the circulation through the parts is restored."

TREATMENT OF ERYSIPELAS.—Dr. J. W. Boyrath reports a case in the *Medical Standard* as follows: "The patient, a little girl, aged two and one-half years, had erysipelas, beginning on the leg below the knee, spreading rapidly to the foot and upward until one-third the entire body was involved. Temperature ran high and the systemic symptoms were alarming. I began locally with the old remedy, ichthyol, but got no results. I then changed to creolin and used this faithfully for three days, painting with the pure creolin, leaving it on three minutes and washing off with plain water; but this too failed to give any relief. About this time I read an article advising acetosone—fifteen grains to two pints of water. I used this treatment by keeping wet packs of this solution con-

tinually on the patient. In thirty-six hours the temperature had come down to normal and the disease had entirely abated."

FASTING IN ACUTE DISEASES.—Dr. Morton J. Sands in a paper in the *New York State Journal of Medicine* describes his dietetic treatment of cases of acute disease, especially typhoid fever. He gives absolutely no food, but abundance of water. He says: "It has been my experience that the digestive and assimilative powers of a patient are in abeyance in proportion to the severity of the sickness. On account of fever, possibly of toxins in the blood, of shock to the nervous system following the invasion of disease in a vital organ, nourishment fails to be appropriated to the benefit of the system and only handicaps the patient's chance of recovery. The fasting period varies with the nature and severity of the disease. It has been prolonged to twenty-one days in typhoid, insuring the patient a comfortable illness. The quantity of water given is at least two quarts in twenty-four hours. There is no diarrhoea or tympanites, pain and tenderness very slight, sleeplessness is rare, and delirium seldom present. The patient does not seem as weak at the end of the disease as when fed throughout, and does not appear to lose flesh more rapidly than when fed as usual. Food should be withheld until the tongue is clean, bowels quiet, and temperature normal."

DISTRIBUTION OF STREPTOCOCCI THROUGH INVISIBLE SPUTUM.—Dr. Alice Hamilton, of Chicago, has been conducting investigations in this subject and presents the result in a paper in the *Journal of the American Medical Association*. She found that an increased severity of infection might be conveyed from one scarlet-fever patient to another in this way and that the operating surgeon or nurses in attendance might thus infect a wound by coughing, speaking, or whispering. She thus summarizes her conclusions:

"Streptococci are expelled from the mouth in the invisible droplets of sputum by coughing, speaking, whispering, crying, or breathing forcibly through the mouth. They are expelled to a distance of at least thirty-six centimetres. Thirty-three out of fifty scarlet-fever patients, most of them children, were found to expel streptococci in coughing, crying, or breathing; forty-two out of fifty normal adults were found to expel streptococci in coughing or in speaking. The streptococci thus disseminated may be inhaled by others, and may set up streptococcal complications or may fall on the tissues exposed at an operation and cause suppuration. Just as the virulence of an individual strain of streptococcus may be raised by planting on certain nutrient media or by passing

through susceptible animals, so, in all probability, it may be raised by passage from one human being to another. In this way may be explained the conversion of a case of simple scarlet fever into one of scarlatinal sepsis, and in the same way may be explained the cases of surgical sepsis which occur after all usual precautions have been taken. Cases of scarlet fever with streptococcal complications should be isolated from cases without such complications. Surgeons and nurses should have their mouths protected during the time of an operation.

SPINAL COCAINIZATION.—Deloup says in the *New Orleans Medical and Surgical Journal* that he uses a plain four per cent. solution of cocaine made with sterile water and heated to the boiling point at the time of the operation. Based on an experience of a little over one hundred cases, he believes that the following conclusions are justified: 1. That the method is as safe as, if not safer than, general anaesthesia. 2. That we may safely employ up to half a grain of cocaine without fear of toxic effects. 3. That shock, when present, is decidedly less than that of general anaesthesia. 4. That it is attended with less danger of annoying sequelæ and symptoms. 5. That it can be relied on for prolonged operative procedures.

A NEW HYPNOTIC.—Dr. A. P. Stoner in the *New York Medical Journal* speaks favorably of a new hypnotic which he thinks equal in activity to chloral without the depressing effect of that drug on the respiratory and circulatory functions. It is chemically trichlorispropylalcohol and is known as isporal. It occurs as a colorless, shining, crystalline powder, slightly soluble in water, and has a burning taste and a characteristic, pungent odor. He says the best results are to be attained in doses of from 0.65 gramme to one gramme, and it should be taken upon an empty stomach.

TOILET OF THE ANUS.—*American Medicine*, quoting from the *Scottish Medical and Surgical Journal*, says: "A. G. Miller believes that a vast variety of organisms are conveyed by the hand from the anus to other parts of the body, and that, in addition, pathologic conditions of the anus are often the result of imperfect cleansing. These affections generally cause itching, and thus the hands are still more infected. He advises that in addition to the use of toilet paper the anus be carefully washed with soap and water, with the skin put on the stretch after each defecation, this to be followed by thorough cleansing of the hands and nails themselves. He thinks that many cases of pruritus ani, boils, fissure, and even inflamed piles might be prevented by proper cleanliness."

FOREIGN DEPARTMENT

IN CHARGE OF

LAVINIA L. DOCK



THE REVOLUTION IN FRENCH HOSPITALS

(Continued from page 522.)

HOSPITALS OF PARIS

IN 1877 the famous "laicisation" of the Paris hospitals took place, and in 1878 the first nursing school was established. Let it not be supposed, however, that anything like the pioneer schools of England or America was created, or that any similar movement among educated women renovated these old hospitals.

"Laicisation" meant that the religious sisters were removed from the hospitals and that the entire control of the nursing arrangements was assumed by the directors and official and medical staffs. The entire nursing personnel consisted of an enormous and unwieldy mass of illiterate, common, unrefined—indeed, often coarse and hardened—servant nurses of both sexes. The change naturally met with bitter opposition from the clergy and all the friends of the sisters. Yet the clergy themselves were primarily to blame, for, by their artificial and arbitrary ruling and limiting of the usefulness of the sisters they had made them simply figure-heads, not directly responsible to the medical staff, not invariably obedient to the medical chiefs, not realizing the demands of asepsis and science—in short, retrograde workers, no longer adapted to their environment.

The correspondent of the *British Medical Journal* above quoted wrote:

"Had the French Sisters of Charity moved with the times to establish training-schools; had they taken their part in the Nightingale movement in England or the deaconess system of Germany, they might now be in a better position before the world."

While these words are perfectly correct, the writer should have put the blame for this deterioration where it really belonged, namely, on the shoulders of the men whose preposterous interference and repression had effectually ruined the sisters' usefulness.

So these women, who could have been and who might have been the most perfect nurses imaginable, many of them belonging precisely to the refined class needed in hospital, were turned out because one set

of men had so subordinated them that they were useless as handmaidens of modern medical science, and another set of men undertook to show what they could do in the training and ruling of nurses. The situation had its pathos, and was not without its ludicrous features.

The "nursing school" first established was by no means after the English models. The first necessity, before beginning a course of professional lectures, was to impart primary instruction, for the majority of the nurses were unable to read and write. The process was a slow one too, because they could not be compelled to attend the courses of instruction. They were not taken in under contract to fulfil a course of practical and theoretical work; they were engaged on a wages' basis, and could only be encouraged to avail themselves voluntarily of the educational advantages offered.

The problem was an enormous one. The municipality of Paris has under the care of its Public Charities Department fourteen large general hospitals, eighteen special hospitals, and twenty-seven institutions for chronics, incurables, almshouse cases, and every imaginable variety of dependent. What the total number of patients was when the change was first inaugurated I do not know, but in 1888 Paris was caring for two hundred thousand patients, twenty-four thousand infirm, two hundred thousand paupers, and forty thousand rescued children.

All this with the lay nursing staff, who were getting lessons in reading and writing. The first "school" was started in the hospital La Salpêtrière, the next in Bicêtre, then in Laënnec, Pitié, and so on. The two former are for chronic and incurable cases. Here it was, of course, easier to begin. The plan of the physicians was to divide the teaching under three heads: (1) the course of general education; (2) the professional theory; (3) practical work by rotation in the wards. They made this plan, struggled with it, and struggled with the nursing staff, alone.

Let us not appear to criticize these men unfairly. It is not easy to say where, or how, they could have found trained, competent, educated women to help them. It was just after the time of a dreadful war; Germany was a deadly enemy, otherwise head nurses or matrons might have been found there. With England, also, national feelings were so little friendly that Dr. Anna Hamilton says it was not until 1897 that a fairly detailed account of Miss Nightingale's work was given in a French medical journal, and that it would have been quite useless to suggest asking English nurses to undertake reform work (though they would doubtless have been glad to do it). As late as 1896 an English sister was called to a hospital in Marseilles, and to-day this unfortunate prejudice between two nations has happily disappeared.

Dr. Hamilton herself is not an old enough woman to have been ready to help in the beginning. Her own splendid hospital work was begun in the early '90's. One does not wish to be unjust to the French women, either, yet it seems hard to avoid the conclusion that women of refinement and education were far behind those of other countries in going into public work. Even as late as to-day, at International Congresses, the number of French women representing voluntary social reform and public-spirited movements is strikingly smaller than the number of those from other countries of equal size.

In Germany the organized activity of the women in the War of 1813 gave the actual impetus to the early nursing movement of Kaiserswerth and the Deaconess houses, and the Franco-Prussian War gave an enormous stimulus to women's work in hospitals, under the Red-Cross, and in works of general benevolence. But, strangely, the war does not appear to have shown this result in France. Certainly there was no general movement among women of the better class to become active in hospital management and to create or themselves enter into the work of trained nursing. It is possible that those who by character and position were fitted for this kind of service were already in the banished orders. Whatever the reasons, one cannot but be struck by the absence of the women, the isolated loneliness of the men in their reform, and cannot but admire and respect the courage, patience, and persistence of the latter most heartily. When one thinks of the Vienna hospital, and the complete indifference of the men there to the wretched nursing conditions, and contrasts it with the purpose and the ideals of the French directors and medical chiefs, one's admiration increases even to warm recognition and gratitude. For at least their ideals and purposes are high and good. They wish to have an educated and efficient nursing staff. They wish to elevate and to teach the nurse. They want her to be the capable colleague of the physician. They recognize the deficiencies and their efforts have been heroic. Especially must one regard Dr. Bourneville as preëminent in this movement for nursing reform. Everything that they could do themselves they have done, and if their results do not seem to us good, it is because there are some things they cannot do. Let us repeat that the task has been herculean. Friends of the banished sisters in the lay management tried to balk the efforts of the reforming medical chiefs, and opponents of the new order in the medical staff made it hard for lay managers who tried to reform the new service. These things happen everywhere, and in all kinds of work, especially in educational reforms.

So it came about that, although the physicians had from the first demanded rotation in the wards for the pupils, they have never been able

to get it. They complain, too, that the nurses are often removed from one hospital to another, breaking off their studies and thus discouraging them.

Dr. Bourneville, in one of his reports, speaks of an apparent injustice in the fact that nurses appointed to the higher posts of head nurse or supervisor were not always those who had taken the course of study. But as the amphitheatre attendants and other employes not directly concerned with nursing are also admitted to the study course, it is evident that it cannot be assumed that those who had had it were the best practical nurses. They might, indeed, be elevator men or book-keepers and not nurses at all.

In spite of all difficulties progress has been made, the grade of applicant has improved, and a larger number have had a primary education. Moreover, every year a larger number take the hospital course. In 1900, according to Dr. Bourneville, fifty-two passed the examinations. The course consists of seven lessons in ward management and hospital records and account keeping, six each in anatomy and physiology, twelve in hygiene, eighteen in minor surgery, ten in the uses of drugs, four in obstetrics. A manual of nursing is used as a reading lesson, with explanations. Every year lectures are given by specialists and a set of leaflets dealing with special points is published and these are at the service of the nurses. Practical exercises, he reported, were conducted every day, in surgical and medical wards alternately, under the direction of the "surveillantes," or supervising nurses (who, however, themselves may be only "experienced" nurses without teaching). The exercises consist of the care of instruments, management of dressings, and handling of drugs. The pupils are taught to apply dressings, blisters, etc., take temperature, pulse, and respiration, to vaccinate, give hypodermic and other injections, irrigations, etc. The professional "cupper" of each hospital teaches them to cup; the bath attendants teach them to give baths, douches, etc.; "sage-femme," or midwife, teaches the women how to examine and how to do up a parturient patient. A manikin is used for bandaging, and, as each course is finished, the pupils are required to write several essays upon what they have learned. An examination is then set, with a minimum to pass.

Dr. Bourneville in the report above mentioned enumerated the points in which improvement was necessary to make the service what it should be. Better rooms for the nurses are urgently needed. At present they are badly housed. Their food is not good, and the men's summer uniform should be different. Night duty needs improvement. At present it is often necessary to put probationers on night duty. Each school needs a small amphitheatre class-room, a sitting-room, a nurses'

library, and specimen room. Then, promotion should take place in a just and orderly way. The higher posts should only be given to those holding the hospital diploma, and the salaries should rise with length of service.

Further, he recommended that vacation houses should be maintained for the nurses, or else that they should have paid vacations. He advised the establishment of training-schools in every town, and urged that the possession of a diploma be made as obligatory for the nurse as for the teacher. After his report was read he asked for a resolution. The various speakers warmly endorsed his points. Dr. Berthod said that physicians could not get good results with dirty and ignorant nurses. They had to be clean and they ought to be lodged comfortably. Moreover, they could not study when they were over-tired with work. The pay should be better, the work made more dignified, the housing should be better, and the moral tone raised. This, he said, had been done in the Lyon hospital.

The president of the meeting remarked that he had once thought devotion was sufficient, but now he believed in training. The school in Lyon was open to lay women and to "religieuses." Dr. Bourneville said this was also the case in Paris, but the sisters would not come. Resolutions were finally passed endorsing Dr. Bourneville's recommendations.

Again, the situation has its pathos, as one regards all these learned—and not only learned, but cultured and most courteous—men striving in scholarly and conscientious fashion to educate and train their hundreds of nurses. The ridiculous side is also again discernible. Dr. Hamilton scores them all right roundly for not putting trained matrons or women principals in charge, criticises unsparingly the scientific theory which they present to these pupils, in whose entire hospital sojourn all that we include in the term "practical training" is so lamentably absent, and declares that examinations at which she has been present, when scientific men examined pupils in *nursing*, which they knew nothing about, would move one alternately to tears and laughter.

I went through some of the great hospitals in Paris, and I must confess, while feeling every sympathy with the efforts made and every wish to judge justly, that the impression made was most painful. For one thing the general aspect of the wards is one of cheerless, military, and unhomelike bareness. This is in the older hospitals. Two beautiful smaller hospitals are exceptions to this—viz., the Broca and the Boucicaut.

Then, among the nurses, while again military system was apparent, one's heart sank. I think the uniform is largely accountable for this im-

pression. The nurses are most carefully uniformed, with different kinds of caps showing the different grades, different ribbon bands, etc., and, alas, the uniforms are lamentable. The junior nurses wear a linen supposed to be white. It is, instead, the sad, hopeless gray of badly laundered hospital sheets. The dresses are made with much fulness, big linen squares tied on for aprons, and these of the most disheartening grime. The caps are not plain and simple, like the unassuming but spotless linen of the German sisters. They are flimsy, coquettish, elaborate, with velvet or ribbon bands, small, perched upon untidy hair, and so dirty that they are funny. Altogether the impression is quite indescribable. The "surveillantes," who wear a dark-colored dress, look much better, although still far from the ideal. Many of the younger nurses one sees have a callous expression and a flippant manner; then, on the contrary, one meets quite frequently rather older women who give one a cheering impression of character, worth, and ability. I was told in one of the hospitals by a young physician that striking improvements in the nursing staff had taken place in the last two years.

The classification of the nurses was something I did not get straight, but those who take the training appear to be distinguished from the others by a special title. The "surveillantes," or supervising nurses, are in five classes. The "matron" of the English hospitals, or the superintendent of nurses of ours, is conspicuous by her absence, and no one realizes what she is to a hospital until one visits hospitals where she is not. To her non-existence I attribute all the chilly unhomelikeness, lack of "atmosphere," and general dreariness that one finds in many of these big European barracks of hospitals, some of which look no pleasanter to live in than if they were so many clinical laboratories. The old Hôtel Dieu is one of the dreariest of all. It is one of two which still retain the Sisters of Charity, owing, I believe, to some clause in its constitution. The statues of Bishop Landry and two of the early French kings stand near the entrance, and they certainly have not been dusted in fifty years.

The Bouicaut, which is a very beautiful pavilion hospital, was built not long ago by private benevolence and placed under the management of the city.

(To be continued.)

THE ENGLISH REGISTRATION MOVEMENT

THE Select Committee have recently heard some strong testimony in favor of registration. Mrs. Bedford Fenwick gave an outline of the entire movement from the time of founding the Royal British Nurses' Association in 1887 to establish it. She showed what had been done in

South Africa and in New Zealand, and reported the excellent effect of these acts, especially that of New Zealand, which is much the best. She gave a strong statement of the whole evolution of conditions from the educational standpoint, and made a special plea for justice to trained nurses as a valuable class of public workers. After reading a general statement which refuted the arguments of the opposition she handed in a synopsis of nearly one hundred cases in which women described as nurses and engaged in nursing had appeared in the courts for criminal offences varying from murder to petty thefts. While these criminals may not actually have been nurses, yet trained nurses have to endure the odium and ignominy of such proceeding. She also handed in a statement prepared by the State Registration Society, representing fifteen hundred matrons and nurses, and a list of eighteen hundred medical practitioners, nurses, matrons, and public persons in favor of registration, with copies of all resolutions passed by public bodies in favor of it. Her entire mass of material was strong, complete, and irrefutable, and meant a tremendous amount of hard work.

Several prominent physicians have also testified in most emphatic and positive terms for registration. Sir James Crichton Browne, Sir Victor Horsley, Dr. Bezly Thorne, and Dr. Langley Browne have given excellent testimony, and, although they have only told the Select Committee exactly the same things that the nurses have told them, the Select Committee heard them with much more respect and deference. So preponderatingly strong has the whole registration evidence been so far, that it seems hardly possible it can be ignored. One feels that it must be accepted. If it is not, the explanation will lie chiefly in the strange indifference to education which keeps England back in lines where the worker needs to be fitted for the work, and in the preponderance of sentimentality over a sense of justice among masculine beings.

However it turns out, the organized nurses of Great Britain and Ireland have made a magnificent campaign of education and have shown courage, energy, and persistence which must excite general admiration. No one will ever know how much hard work it has all meant except those who have gone through similar trials.

L. L. D.

ITEMS

DR. DOURY, writing to the *Lancet*, thinks that cases of syphilis should be reported to health boards and general measures taken against this disease. He is of the opinion that if syphilis and gonorrhoea could be stamped out, phthisis and infantile tuberculosis, kidney disease, gynaecological disorders, bone, eye, ear, skin, brain, spinal-cord diseases and,

finally, cancer, would be reduced by one-half. He declares it to be absurd that tuberculosis, scarlet fever, chicken-pox, and smallpox should be reported and these two deadly and undermining maladies, through "a pseudo-puritanical spirit which will not allow the innocent to be protected from the guilty," should be ignored and let to go as they please.

France has now formed a national association for the prevention of syphilis, and in Germany a movement among physicians to educate the public is beginning, as a result of the German state insurance laws against invalidity.

THE German Nurses' Association will begin next autumn to publish its own journal. This is a matter for sincere congratulation indeed. The journal will be the property and organ of the association and will be devoted entirely to advancing the educational and ethical standards of nursing, upholding the principle of self-government in professional affairs, strengthening the bond of union between the members, and in every way promoting the dignity, honor, and progress of trained nursing.

MORE than two hundred medical men in Paris have founded an International Medical Association Against War. The president is Dr. Rivi re, who, in his discourse, held that medical men, who were so intimately acquainted with human misery, both physical and moral, were by that very fact the most fitted of the community to collaborate in the work of substituting arbitration for war.

THE *Lancet* for March 25 and April 1 gives a detailed account of the medical inspection and the nursing service of the New York public schools, and accords high praise and recognition to the work of the nurses.

A NURSE trained in the Jewish Hospital in Amsterdam, named Sister M. van Gelder, is to go early in the summer to Jerusalem as head sister in the Jewish Hospital of that historic town.

WE desire to correct the statement made last month, that Miss Maule, of *Nursing Notes*, London, appeared in support of the city financiers' project to register English nurses under the Board of Trade. Miss Maule was simply present to hear the proceedings.

LETTERS TO THE EDITOR



[The Editor is not responsible for opinions expressed in this Department.]

DEAR EDITOR: I regret to see that the opening of your pages to the vexed question of untrained women encroaching on the field of the trained nurses is not bringing forth any more lucid solutions than have yet been suggested, and I am perplexed as to just how the nurses themselves are to find the remedy. I feel convinced that the lowering of price is not the root of the matter, though one must be greatly guided by judgment in this, as in all things. There must be a standard or graduate price, which the community should recognize as the market value of the services they will receive. The rest has to be left to the individual. The nurse who is known to lower her price has a harder hill to climb back than should fall to her lot, for it is not encouraging to those who are willing to bring their skill within the needs of their poorer neighbors by making a modification in their terms to hear that the doctor they have nursed for "knows that he can get Miss So and So for fifteen dollars." To the minds of the commonalty this has a way of suggesting a something lacking, or an inferiority in that nurse, which, while unjust to her, is exactly what they are seeking in the trained attendant—a low wage and a minimum of skill. I think what does lie within the scope of the nurse herself is a still greater devotion to the details of her profession, to see to it that nothing is done in a perfunctory manner, a thing easily felt by the patient and divined by the rest of the family. Study to attain that happy medium that will maintain individual dignity and yet efface all obtrusive personality. I think the untrained helper is less assertive and in evidence than our white-gowned graduate, and can be treated with a little less ceremony, which in some families means less trouble all round, so that it seems easier to say, "Oh, yes! an untrained nurse will suit us better. We had a great deal of trouble when Miss Blank was here." Therefore, regardless of the risk which lack of knowledge may incur, the die is cast, and the ranks of the graduate nurse suffers from the indiscretion or mere thoughtlessness of some few.

I must say emphatically that many doctors are sadly disloyal to the graduate nurse as a body, as they distinctly create the demand for skilled assistance; and then, when it lies at their hand, they will deliberately pass by on the other side, and place their patients in charge of those

who, perhaps, can hardly tell the right end of the thermometer to use, much less record its readings. If legislation is going to prove our best backing, then, by all that is legal, let us wake up to the fact that nothing but our own fight can win our battle and assert our lawful position in the profession of to-day. The medical men tolerate no usurpers or frauds in their ranks, why should there be grades of undesirable elements in ours? Open discussion on this topic will help us to discover the flaws in our armor, but once more let it not end in talk, but let the need be met by earnest and true working for the betterment of our noble profession.

"N. J."

DEAR EDITOR: The editorial comment in the April number of *THE AMERICAN JOURNAL OF NURSING* on "Untrained versus Trained Nurses," and the answer in the May number written by the Waltham graduate, inspires me to express my views.

The "far-seeing patient" spoken of in the editorial comment "hits the nail on the head," according to my fancy. The fact that the doctor makes more visits upon his patient when the untrained nurse or the nurse still in training from some hospital is with his patient proves that from a business standpoint this is highly satisfactory to him. Especially so is it to the doctor whose practice is not as large as he would wish it, or to the doctor who is managing a hospital; for by sending his undergraduates out "to learn private duty" his hospital is being supported by these young women, who are using up tremendous amounts of nerve force for fear something will go wrong, and losing a lot of sleep and missing some very important things which were probably happening in the hospital, which if they happened to have as emergencies in private work, they would not know how to meet. No, I don't think the Waltham graduate's suggestion helps matters any. It is absolutely impossible to teach private nursing, as no two cases are alike, but a good woman possessing brains, common-sense, refinement, and a sense of humor can always adapt herself to her surroundings, providing she has had two whole years of actual hospital training in any of our big hospitals. To my mind there is such a thing as spending so much time "seeking knowledge" that the patient is often the last consideration, and it is an unknown factor how to make a patient really comfortable. The doctor who believes in sending nurses out of the hospital during training "to be taught private nursing" is much more of a friend to his hospital than he is to the nurses, as it is an excellent means of bringing in money to the hospital.

Nothing is more wearing than private nursing, even with the nicest kind of people, which alas! it isn't always the fate of the trained nurse to

most. And often the pupil nurse submits to much more than she should and says nothing simply for fear of losing her diploma. While, on the other hand, the regular life of the hospital is most fascinating, and with so many different scenes is never monotonous. Very often after the graduate of such a hospital finishes her training she has the pleasure of sitting in her room while the undergraduates of her hospital are being sent to the patients that she should be getting, her hospital superintendent receiving fifteen dollars a week for each one he sends out. People are not eager to pay twenty-five dollars if they can get someone for fifteen dollars and be assured by their physician that she is quite as good!

The doctor who employs untrained nurses for his cases is also a great friend of himself, as his more frequent visits in consequence naturally mean more money to him.

Patients who are very ill and poor can always get in some hospital, the district nurse and "the hourly nurse" can respond to those who are convalescing, while for a number of cases the untrained nurse is quite sufficient; but for acute cases where patients can afford to be treated in their home, there is no one like a thoroughly competent graduate nurse. They act as a steadying motor in the family and greatly lessen the nervous anxiety of the attending physician.

A MASSACHUSETTS GENERAL GRADUATE.

(Neither of these writers has suggested a practical remedy.—Ed.)

DEAR EDITOR: The question of post-graduate work for nurses has indeed become a serious one.

As stated in the article on "Post-Graduate Study for Nurses," in the June number of the JOURNAL, there are a number of schools that give post-graduate work, but it is not, as a rule, what the older graduates need.

In the majority of instances, I believe, the graduate nurse enters the hospital and does the routine work with the pupil nurses, getting in that way what information she can in recent methods, etc., but giving the greater part of her time and strength to work that is perfectly familiar to her. I know one nurse who took a nine-months' post-graduate course in a New York hospital, who had three months of very hard general night duty, and who at the end of the course was completely broken down and ready for a three-months' rest.

I do not wish to be a grumbler nor to imply that nurses should shirk hard work when necessary, for it is the discipline largely essential to the making of a good nurse; but while some strong, robust women

might take these strenuous courses without detriment, there are many good nurses—graduates of from ten to fifteen years, perhaps—who have reached the point when they have to consider their own health and strength carefully, having often not only themselves but others to support, who feel the need of "brushing up," but who simply cannot afford to give the strength necessary for such a course, especially as the result is often far from what is desired.

My field of work has been for a number of years in the towns of Georgia.

It is a good field,—always work—interesting work,—and the regular price always cheerfully paid a nurse. But there are no hospitals within reach, only in the larger cities, and almost no professional atmosphere for the nurse, and one becomes very "rusty." The physician becomes rusty too, but he betakes himself to some Northern city, enters a hospital or hospitals, and there observes what he wishes to observe and returns refreshed and invigorated for his work.

Why should it not be possible for a nurse to do the same?

Why should she not be able to enter a hospital, see the new methods of work, attend lectures and classes, and have the benefit of the professional atmosphere, which she so much needs, without giving her time and strength to such work as the giving of baths, bed-making, etc.?

Would it be impracticable for graduates to enter the preparatory course at the Johns Hopkins, for instance? That course would be invaluable to many nurses, giving the systematic review of text-book work,—which in our irregular life is almost impossible,—the most recent and best practical methods of work, the inspiring and rejuvenating influences of the school life, and opportunities for observation and growth in many ways.

One must look at it from the point of view of the superintendent of the training-school, of course, but might it not be so arranged as not to interfere with the routine or add to the cares of the superintendent?

In the above-mentioned case, with a limited number of graduates, living outside of school and simply attending classes, why would it not be a possible arrangement?

I am sure that any graduate desiring this work would be willing to pay a fee for the privilege.

Would it not also be possible for graduate nurses to do systematic observation in the hospitals? It seems as if a sensible, dignified woman, who knows what the hospital work means, might make herself even less objectionable than a physician.

Of course, this applies more especially to nurses doing private

work away from the cities. It has been my experience that there is a very great need for post-graduate work.

It is very easy for a clever nurse in a good field where she has made her reputation just to go on indefinitely, unless professional pride prevents, when the opportunities open for post-graduate work are so unattractive.

I should be very glad to hear an expression of opinion on the subject through the JOURNAL.

V. V. H.

DEAR EDITOR: The midwife question in America as compared to other countries is not quite as simple a matter to us as may seem at first.

In Little Italy, on the upper East Side, the midwives "flourish as the green bay-tree," and consequently numbers of unnecessary deaths follow in their wake, and yet up to the present time in New York State there seems no way of stopping the practice, even of the most ignorant among them.

Called to a case in the district mentioned above a short time ago, the patient was found to be a young woman of eighteen who had given birth to twins six days previously. Three days after confinement septicæmia developed, but not until three more days had passed did the midwife in charge consent to a doctor being called. He at once cured, and found that one placenta had been retained in the uterus. Close questioning of the midwife disclosed the fact of her entire ignorance of two placentas under the existing circumstances.

The case was reported to the Board of Health, and the reply was as follows:

"In answer to your favor of the 17th inst. I beg to inform you that there is no such thing as a licensed midwife in this city or State. Strange as it may appear, there is no law compelling a midwife to pass an examination or procure a license in order to follow out her calling. If you will furnish me with any information that shows malpractice on her part in any particular instance, I will be only too glad to try and bring her to justice."

Is not this a problem that we, as a body of nurses, might help solve?

ROSABELLE JACOBUS.

DEAR EDITOR: I have been reading with a great deal of interest the articles you publish in regard to the employment of untrained nurses by physicians. This is very much to be regretted, but do you not think that sometimes the trouble lies with nurses themselves?

I have been in private practice for a number of years and was

trained at a school noted for its discipline, where absolute loyalty to the physician was insisted upon. When working with other nurses I have been very much surprised to see how freely they criticize the doctor's treatment, even to the friends of the family. I have in mind a case in which a doctor stubbornly held to his diagnosis in the face of great opposition from all quarters. He placed confidence in his nurse, and not until the patient was well and the doctor triumphant was it found out that she—the nurse—had attempted to diagnose the case herself, imparting her fears to the friends of the patient, saying that she thought the doctor was mistaken, at the same time telling them to say nothing to him about her opinions. You may imagine the state of mind of the patient's friends: and this from a graduate of a reputable hospital. Another young nurse, when ordered by the doctor to give tepid baths to a delicate child suffering from typhoid, gave the baths cold, remarking that "nurses knew a great deal more than doctors about such things and cold water was better." The same nurse declined to feed her patient during the night, saying that "sleep was better than food," when, as a matter of fact, the "sleep" was simply the torpor of typhoid. That doctors often prefer women of limited intelligence who will do as they are told and hold their tongues is not to be wondered at.

Then there is the nurse who has such an exalted idea of her own importance that she requires a great deal of waiting on, really causing a great deal of discomfort in a modest household. All things of this sort prejudice people against trained nurses, and so the great body of careful, unselfish women, with the good of the race at heart, has to suffer because of the unwise conduct of the few.

The writer has a patient whom she has often nursed. Being busy, another nurse was called in at one time. In reference to her service the patient said, "If Miss — had been the only trained nurse I had ever employed, I should never have had another one in the house, for she would have given me such an unpleasant idea about them all."

Surely this is not as it should be—it certainly is not what we are taught in our training-schools; we ought to be a vital necessity, instead of infliction to be dreaded.

A WESTERN NURSE.

[LETTERS to the editor must be accompanied by the name in full and address of the writer, otherwise such communications cannot be recognized. The name need not appear in the JOURNAL unless so desired.—Ed.]



EDITOR'S MISCELLANY



FROM A NURSE'S POINT OF VIEW.—The Boston *Evening Transcript* of June 3 contains the following:

"To the Editor of the Transcript:

"Last week there was held in this city a meeting in the interest of the education of nurses, which was attended by many eminent and praiseworthy people.

"In the course of the meeting a statement was made to the effect that a large number of the women who entered training-schools were of commonplace or inferior intelligence, and were drawn to the life chiefly by the desire to earn big money.

"I desire to emphatically refute this statement. I think I am qualified to do so because, in the first place, I am a nurse—one of the women criticised. I hold two diplomas from Boston hospitals, one for a full course and one for a post-graduate course, and I have intimately known the personnel of the schools of other hospitals in this and other cities by virtue of having done post-graduate and special work therein. Therefore it is clear that I have had large opportunity to know what sort of women enter the nursing profession.

"In the second place, I am of old Knickerbocker stock. My father and grandfather and great-grandfather were gentlemen and scholars, members of the clerical and medical professions; so I think it may be admitted that I have a sufficient standard of breeding by which to judge my fellow-workers.

"To begin with, I frankly admit that there are commonplace nurses, just as there are commonplace physicians and commonplace men and women in *la haute société* or in any other walk of life that you may mention.

"To say, however, that the majority of professional nurses are commonplace is to show a lack of intelligent knowledge of the matter in hand.

"It is well to remember that we are Americans.

"There are a great many women in this country who possess in a marked degree intelligence, ability, and character, who through accident of circumstances were not born into the traditions of culture and gentle manners. Through no fault of their own they must acquire, by dint of effort, the knowledge and customs that have been part of the daily growth in life of the more favored.

"There are many of these women in the nursing profession. They are women whom I delight to honor. They are the women of whom

Dr. Weir Mitchell has said: 'The American woman has wonderful powers of self-development.'

"Give them a little more than half a chance and their intelligence and right instincts will appropriate all that is best in life; and they will bear testimony to the inherent worth of human character.

"Besides these women of whom I speak there are in the nursing profession many others who were born to the best things, and by the best things I do not mean wealth or social position, but that atmosphere of scholarly refinement which, superadded to character, gives the touch of grace without which our social structure would be sadly incomplete.

"Some of the finest women I have ever known I have met in the training-schools.

"Where did they come from?"

"They came from little towns in Maine and on the Cape, from towns over the Canadian border, from the cities of the South and West, and from the Atlantic seaboard. They were worthy descendants of loyalist and Puritan, Quaker and pioneer, and Southern gentlemen.

"In this day of advanced curricula it seems as if every thoughtful person must realize that a woman of inferior intelligence could not win through a good training-school.

"To successfully study bacteriology, biology, hygiene, therapeutics, dietetics, and household economics requires no mean order of intelligence.

"The only schools in which I have met women who may justly be called inferior and commonplace are the small schools attached to private hospitals and the schools whose course is numbered in months instead of years.

"The woman with a touch of vulgarity about her will choose to study in a private hospital from a mistaken notion that she will increase her own prestige by nursing only people of the better class; and the woman who cares more for the money than the work will always be tempted by the shorter course.

"When State registration shall have been accomplished, these schools will be brought up to the standard, and then the public will have closed one gateway by which inferior women may now enter the nursing profession and the homes of the people.

"But do not the nurses think a great deal about the money they earn?"

"They certainly mean to earn their living by their professions. So do the physicians, and no one thinks the less of them for that; for they also mean to restore their patients to health. Men who hold positions of civic trust earn their living thereby, but that fact does not prevent their being faithful citizens.

"I think part of the difficulty arises because we are women. Everyone expects a man to earn his living and respects him for doing so. With women it is different. We have not been at it very long, not more than two generations; and it is not unnatural that the thoughts of others, and perhaps our own, should dwell upon the matter rather disproportionately. I have known nurses who, it seemed to me, thought too much of the money side of the question—though, perhaps, it would be more true to say that they expressed their thoughts with want of good taste. At the same time I have known well that these were good, true women, faithful and devoted in their work, and ready to place the patient's interest above their own when the two interests conflict, as they sometimes will.

"This matter will adjust itself if we are allowed time. We ask you, good people, to give us time and to give us of your honor and confidence.

"It is perfectly true that, try as we will, we cannot do our best for those who distrust and criticise us, though they be in high place. It is equally true that all our best responds when we are honored and trusted, albeit by the poor and lowly.

"J. B. S."

THE OCCUPATION OF NURSING.—The *Boston Medical and Surgical Journal* of March 30 says:

"On Friday of this week a conference is to be held in this city to consider the question of forming an association of those interested and actively engaged in advancing the cause of nursing. It is hoped that through the formation of such an association more uniform methods of training, higher standards of education, more effective coöperation between the medical profession and nursing, and more serviceable relations between nurses and those needing their services may be brought about. It is announced that Dr. R. C. Cabot will deliver an address upon 'The Possible Uses and Benefits of the Proposed Association.' A long list of representative names, headed by President C. W. Eliot, is appended to the circular which announces the aims of the meeting.

"If this meeting fulfils even a part of the object which it has set itself, of fundamentally improving the art of nursing, it will have justified the efforts of its promoters. The tendency of the past few years has been towards greater coöperation among nurses and completer organisation. With this has naturally come an increasing sense of the dignity of the calling, until it is now insisted in some quarters that nursing must hereafter be termed a profession. Whatever our personal opinion may be regarding the justification for this change of attitude, we are convinced that whatever tends to improve nursing as an art is to be encouraged, and whatever, on the other hand, tends to obscure this

element should meet with the warmest condemnation. It is a matter of small consequence whether a body of women band themselves together as a profession or under some humbler title, provided they do not lose sight of the object for which they exist, namely, simple nursing of the sick.

"Just in so far as the organization which meets this week insists upon this practical matter as the corner-stone of its work, it will be of benefit. If it can succeed in still further impressing upon nurses the extraordinary difficulty of the calling they have chosen and the high qualities of mind and character demanded for its successful accomplishment, it will be welcomed and encouraged by the medical profession. If, however, and here we see a positive danger, the main issue is lost sight of in organization and theory and insistence on more training when more training is not needed, we cannot see in it a source of progress. What physicians wish is good nurses, and if nursing is to be a profession, it must supply good nurses. If this can be better done by organization, no one can possibly object; if organization tends towards a neglect of the individual patient, let us return to the simpler methods. These are matters for the nurses themselves to decide.

"The problem is a simple one to state. How are we to secure trustworthy, tactful, sufficiently trained nurses? How is the physician to be protected, and to protect his patient against bad temper, lack of judgment, carelessness, and tactlessness, or worse, on the part of the nurse? Are we to expect from the nurses' organization a censorship which will reduce to a minimum the possibility of entrance to their calling of women unfitted by education and temperament for the exacting work which it entails? or are these fundamentals to be forgotten in the broader questions which now seem to be pushing towards the front? If our doubts grow insistent at times, it is not without reason. Nursing is drudgery, and, so far as we can see, always will be. If the drudgery can be lightened, so much the better, but women undertaking nursing should fully appreciate the facts as they are before they have injured both themselves and their calling by failure when the actual test comes. The modern nurse is often sufficiently well trained in the mechanical part of her art when she falls lamentably short of the qualities which render her possible in a sick-room. What we need is tact, and willingness to work, and common-sense, perhaps difficult qualities to instil, but none the less essential. We trust if the association to which we have alluded is formed, that it will give a share of its attention to these prosaic matters, and recognize the pitfalls into which it may easily fall under the present policy of expansion."

[While we may not altogether agree with this writer, we must admit that some of his observations contain a considerable degree of common-sense.—Ed.]

OFFICIAL REPORTS



[All communications for this department must be sent to the office of the Editor-in-Chief at Rochester, N. Y.]

HOSPITAL ECONOMICS

It is rather a difficult problem to sift from all the interesting work seen and accomplished during a busy month (and each month is more busy than the last) at Teachers College and decide just what would really be of most interest to those who will come day by day to "H. E.'s." Most instructive were the lectures given by Miss Goodrich on "Hospital Construction," at the close of which the members of the class were asked to submit plans and specifications of a general hospital to be erected on a plot of ground two hundred feet square, open on all sides, which would accommodate one hundred and twenty patients, twenty of whom shall be children and twenty private patients, such plans to include an administration building and other buildings, with such rooms and departments as were specified as necessary in the lectures on "Hospital Construction," the arrangement of such departments as part of the administration building or in separate pavilions being optional, the accommodations necessary for the working staff—viz., officers, doctors, nurses, and all other employees—left to the decision of the designer, the plans submitted to include descriptive plan of ground, showing location of buildings.

The ground plan of the hospital was given each member of the class to work out, while special departments, such as private patients' pavilion, isolating wards, children's pavilion, ward pavilion, and operating-rooms, were given to individual members. The plans submitted count for us as an examination on this subject, and we are hoping for "A" marks, since it is proverbial that all architects believe their plans preeminently good.

The practice teaching at Speyer's School has been of infinite value to us, our only regret being that we could not have more of it. Nine months seems very short when there is so much to accomplish. Would that every nurse in this broad land might have two years at Teachers College.

L. N. WHEAT.

COURSE IN HOSPITAL ECONOMICS

Subscriptions for the Endowment Fund, May, 1906:

Miss W. Petersen	\$10.00
Miss Lucy L. Drown	10.00
Miss Ida Lawson	25.00
New York State Nurses' Association	50.00

STATE MEETINGS

NORTH CAROLINA.—The North Carolina State Nurses' Association met in the chapel of Salem Academy, Winston-Salem, N. C., on May 30 and 31 and June 1, 1906. The association was well represented by nurses from various parts

of the State, from the mountains to the sea, and much genuine enthusiasm prevailed. The following programme was carried out:

1903-1905. NORTH CAROLINA STATE NURSES' ASSOCIATION, THIRD ANNUAL MEETING, WINSTON-SALEM, N. C., MAY 30-31 AND JUNE 1, 1905.

Directors.—President, Miss M. L. Wyche, Durham; first vice-president, Mrs. M. H. Laurance, Raleigh; second vice-president, Miss C. E. Hobbs, Greensboro; secretary, Miss C. E. Pfehl, Winston-Salem; treasurer, Miss Hester Evans, Asheville; Miss Batterham, Asheville; Miss Dunn, Raleigh.

Committees.—Membership—Miss Batterham, Asheville; Mrs. Laurance, Raleigh; Miss Hobbs, Greensboro. Ways and Means—Mrs. Laurance, Raleigh; Miss Hayes, Raleigh; Miss Sturgeon, Raleigh. Printing—Miss Pfehl, Winston-Salem; Miss Wyche, Durham; Miss Hobbs, Greensboro.

PROGRAMME.

Tuesday Evening, May 30.—Association called to order in third annual session in the chapel of Salem Academy and College at eight P.M. by Miss M. L. Wyche, president of the State Association; prayer, Rev. J. H. Clowell, Ph.D.; address of welcome, Hon. O. B. Eaton, Mayor of Winston; music; address of welcome, Bishop Edward Bendthaler, D.D.; song; address of welcome from the Forsyth County Medical Association, Dr. Everett Lachett, Winston-Salem; response, Miss Wyche, president North Carolina Nurses' Association; music; informal reception to North Carolina Nurses' Association and members of the Forsyth County Medical Association by Salem Academy and College on the Academy campus.

Wednesday Morning, May 31.—Meeting of Board of Directors, nine A.M.; first business session, ten A.M.; annual address, President M. L. Wyche, Watts Hospital, Durham; roll call; "Preliminary Training for Nurses," Miss Edith Eaton, James Walker Memorial Hospital, Wilmington; "Nursing in the School," Miss C. E. Hobbs, State Normal Infirmary, Greensboro; discussion.

Wednesday Afternoon, May 31.—Second business session, two-thirty P.M.; election of officers; "Nursing," Miss Lydia Holman, Ledger; "Duties of a Nurse to a Parturient Woman," Miss Anna Ferguson, Billingsley Hospital, Statesville; discussion.

Wednesday Evening, May 31.—Picnic luncheon at Nixen Park by Twin City Nurses, six P.M.

Thursday, June 1.—Meeting of Board of Directors, nine A.M.; third business session, ten A.M.; "Tuberculosis," Miss Rosa Hill, Raleigh; discussion; adjournment.

At the opening exercises Dr. J. H. Clowell introduced the various speakers and in a most cordial manner extended to the association the hospitality of the venerable Salem Academy, of which he is the principal. The informal reception on the campus following these exercises was very enjoyable, giving the nurses the early opportunity of greeting one another and becoming acquainted with various members of the medical profession present. The music on this occasion was furnished by the Moravian Boys' Band, of Salem, while the lovely glow cast over the gathered company, the beautiful trees, the fountain, the ferns, etc., by the festoons of electric lights suspended among the trees made it all seem like a fairy picture. At the first business session the short annual address of the president, Miss M. L. Wyche, was well received. The original papers read

at the various sessions were much enjoyed, several being freely discussed. The one calling forth most comment was read by Miss Eaton, of the James Walker Memorial Hospital of Wilmington, N. C., on "Preliminary Training for Nurses." This being the subject that most interested the association at this meeting, it was the decision of the association that the president call on Dr. Charles Melver, of the State Normal School for Women, and coöperate with him in the establishment of a preliminary course for nurses at his school, he having expressed his willingness to give it, and the superintendents of the various hospitals of the State having stated their desire for the course. After the afternoon session the association was invited to a trolley ride by Mr. H. E. Fries, president of the Electric Company, and this was followed by a picnic luncheon at Nimsen Park which had been provided for their entertainment by the Twin-City Nurses. During the various sessions reports were read from the committees and a new committee was appointed by the president to draw up a code of ethics for the association before the next meeting. The association asked the secretary to send the Associated Alumnae of the United States an application for membership into that society. The directors of the association for the year are as follows: President, Miss M. L. Wyche, of Watts Hospital, Durham; first vice-president, Miss Edith Eaton, of James Walker Memorial Hospital, Wilmington; second vice-president, Miss Ella McNichols, of the Presbyterian Hospital, Charlotte; treasurer, Miss Hector Evans, Asheville; secretary, Miss C. E. Pfohl, Winston-Salem; Miss C. E. Hobbs, of the State Normal School Infirmary, Greensboro, and Miss B. Dunn, Raleigh. A resolution was adopted by the association providing that the memorials presented by Miss Dunn to the memory of Mrs. M. H. Laurence, the first vice-president of the association, be sent to the magazines for publication. Various plans of the work of the association for the new year were discussed, after which the meeting adjourned, having accepted the very cordial invitation to meet in Charlotte, N. C., in May, 1908.

CONSTANCE E. PFÖHL, Secretary.

COLORADO—The Colorado State Trained Nurses' Association held its annual meeting at the Young Men's Christian Association Building, Denver, May 11 and 12. The first day was given over to business and the next to the programme. The Membership Committee reported an increase in members and the Legislative Committee summed up the winter's work relative to the passage of the bill to register trained nurses. It was decided to hold two meetings a year: the annual meeting in Denver, for the transaction of the business affairs of the association, and the October meeting in different places over the State for literary and social purposes. This fall it will be held in Boulder. The election resulted as follows: President, Miss Annie E. Harris, Boulder; first vice-president, Miss Emma Margeson, Colorado Springs; second vice-president, Mrs. L. C. Ashton, Denver; secretary, Miss Louise Croft Boyd, Denver; treasurer, Miss Louise Ferrin, Denver. On May 12 the following papers were read and discussed: "Obstetrical Nursing," Miss H. Corey, Denver; "Hydrotherapy," Miss M. Austin, Boulder; "Hourly Nursing," Miss W. A. Donaldson, Denver; "Army Nursing," Miss B. Clinton, Colorado Springs; "Hospital Economics," Miss L. Ferrin, Denver; "A Nurses' Capital," Miss L. L. Hudson, Colorado Springs; "The Ethical Side of Private Duty," Miss H. S. Thompson, Denver. The association was incorporated May 13, 1904.

MINNESOTA.—With the object of petitioning the Legislature for a bill to create a State Board of Examiners for graduate nurses, a meeting at which a temporary organization of a State association was formed was held May 26 in the assembly-room of the Young Women's Christian Association building, Minneapolis. About one hundred graduates were present—nurses from St. Paul, Minneapolis, Brainerd, Stillwater, and Northfield. A letter of regret from Dr. Tomlinson, St. Peter, was read. Miss Erdman acted as temporary chairman and Miss Wood as temporary secretary. Miss Erdman spoke briefly on the object of the meeting. Miss Wood on the work of the convention held at Washington. A Committee on Constitution and By-Laws was appointed—Mrs. Dr. Colvin, Miss Cannon, Miss Erdman, Miss Rummel, and Miss Wood; Nominating Committee, Miss Johnson, Miss Patterson, Miss Jamies, Miss Malloy, and Miss Larson. A reception was given in the evening by the Minneapolis nurses. Several musical numbers were rendered by Miss Dahlstrom. Frogs was served by Miss Laine. The next meeting is to be held in September in St. Paul.

MARY WOOD, Acting Temporary Secretary.

THE State Board of Nurse Examiners is ready to register trained graduate nurses under the provisions of "An Act Relating to Professional Nursing" passed by the Fifteenth General Assembly of the State of Colorado. For information apply to Miss Louis Croft Boyd, 125 East Eighteenth Avenue, Denver, Col.

ANNUAL MEETINGS

PATTERSON, N. J.—The annual meeting of St. Joseph's Hospital Training-School Alumni Association, Patterson, N. J., was held on June 1 at three P.M. After the usual routine business had been disposed of four new members were voted in and four proposed for membership. Final arrangements were made for caring for sick members. After the meeting refreshments were served through the kindness of the sister in charge of the hospital, and an opportunity given the graduates and pupil-nurses to meet. The sister superior invited the members of the association to meet socially as her guests on the first Thursday of each year, in order to keep in touch with and encourage the nurses in training. A committee was appointed to arrange for a midsummer outing.

CINCINNATI, O.—The annual meeting of the Jewish Hospital Alumni Association, of Cincinnati, O., for the election of officers was held at the hospital on May 18, 1906, the following being elected for the ensuing year: President, Miss Fannie Adler; vice-president, Mrs. George Iman; secretary, Alice Mary Arnett; treasurer, Miss Blanche Thomas. The new members of the alumni, who are also the graduating class of 1906, were given a dinner at "The Zoo" on June 5 at seven P.M. to welcome them to the association. The following were entertained: Miss Ruth Ardell, Berr, Ireland; Miss Winifred Madsen, Whitty, Canada; Miss Rebecca Meyers, Congress Lake, O.; Miss Lucile Meier, Mt. Carmel, O.

REGULAR MEETINGS

PHILADELPHIA.—The regular monthly meeting of the Alice Fisher Alumni was held Monday, June 5, at the Alice Fisher Club-House, 504 Pine Street, Philadelphia. Three new members were admitted and Miss Amelia Lusch was

prepared for membership. A letter was read from Miss M. E. Smith accepting the honorary presidency and thanking the alumnae for the honor. The treasurer of the bazaar reported that one hundred and sixty-two dollars and forty-four cents was realized for the fund for sick nurses. The report from the delegates to the convention at Washington was lengthy and very interesting. A discussion followed on the advisability of establishing a central directory, and a committee of seven was appointed to consult with other schools to try to arrange preliminaries. It was also proposed that the alumnae extend aid to the Juvenile Court, and a committee of three was appointed to arrange with the officers to aid and defray some of the expenses in reclaiming these children. Owing to the absence of our president and treasurer, the request of the delegates to Washington to give to the Associated Alumnae ten dollars for purchasing stock in the NURSING JOURNAL was deferred until the next meeting. Adjourned to meet in October.

BROOKLYN, N. Y.—At the May meeting of the Alumnae Association of the Methodist Episcopal Hospital of Brooklyn it was decided to purchase one share of stock in THE AMERICAN JOURNAL OF NURSING and also to contribute ten dollars to the Associated Alumnae to be used towards the purchase of JOURNAL stock for that association. May 25 the Alumnae Association gave a reception to the Class of 1905 after their graduating exercises in the parlors of the Grace Methodist Episcopal Church. The graduates were Miss Martha St. John Eakins, valedictorian; Miss Ruby Nellie Furlong, Miss Lillian Victoria Sherman, Miss Stella Kathleen Kenny, Miss Agnes Eleanor Reany, Miss Jessie A. Twillman, Miss Beatrice Pritchard, Miss Nellie Esther Evans, Miss Margaret Culbert, Miss Lillian Esther Hawkins, Miss Martha St. John Eakins, Miss Mable M. Gaskin, Mrs. Margaret D. Hamilton, Mrs. Lillian MacLernon Carlea, Miss Florence May Patten, Miss Mable Dayton, Miss Harriet A. Chism, Miss Lulu Pearl Rogers.

BALTIMORE, Md.—The Nurses' Alumnae of the University of Maryland, Baltimore, held a regular meeting on June 5 in the assembly-room of the University Hospital. Two new members were admitted into the association, which now numbers ninety. An interesting address was made by Miss V. C. Weitzel, one of the delegates to the convention of the Associated Alumnae. After adjournment refreshments were served.

NEW YORK.—Interest in the Mt. Sinai Alumnae Association grows monthly. At the June meeting a report of the New York State Nurses' Association was read. Miss Hartman gave an interesting account of the recent convention at Washington and a synopsis of the various papers read. Adjournment was preceded by an animated discussion as to the best means of increasing the pension fund.

COLLINGWOOD, ONTARIO.—The graduates of the General and Marine Hospital of Collingwood, Ontario, organized an alumnae association on May 20. President, Miss Redmond; first vice-president, Miss Knox; second vice-president, Miss Carr; secretary, Miss Jenkins; treasurer, Miss Mowson.

THE following notice without city or State has been received: "Medico Chi Hospital Alumnae held a large meeting June 7, 1905. Four members were admitted."

BOSTON.—The regular meeting of the alumni of the Massachusetts State Hospital was held at 223 Newbury Street, Boston, on June 1 at three P.M.

CORRECTION.—On page 618 of the June number of the JOURNAL, eighth line from the bottom, read "paragraph" instead of "photograph."

BIRTHS

On April 17, a daughter to Dr. and Mrs. Richard F. Rand, of Connecticut. Mrs. Rand was Miss Elizabeth W. G. Baker, of Pass Christian, Miss. Johns Hopkins, Class of 1902.

MARRIAGES

At the Church of the Nativity, South Bethlehem, April 27, 1905, Miss Harriet McDowell Bynum, graduate of St. Luke's, Class of 1903, to Mr. Joel Lauriston Hill, of Germantown, N. C.

APRIL 26, in the city of New York, Miss Nell Dunsan Edgar to Mr. Charles Maxwell Green. Mrs. Green was graduated from St. Luke's, South Bethlehem, in 1896.

MISS IDA FLORENCE CHESLEY, a graduate of the Massachusetts General Hospital, to Mr. Albert N. Murray, on Saturday, March 11, 1905.

JUNE 6, 1905, Gertrude Hesp Helms, graduate St. Luke's Hospital, St. Paul, Minn., Class of 1899, to Hugh P. Gaston.

OBITUARY

MISS GRACE ARTHUR, after a short illness of heart complications, died at the Methodist Hospital of Des Moines, Ia., March 16, 1905.

Miss Arthur was born in Millersburg, Ia., and was twenty-two years of age. She was a graduate of the Methodist Hospital Training-School for Nurses, Class of 1904. In her school and class she was ever an industrious student and a cheerful classmate, to her patients always kind, cheerful, and sympathetic.

At a regular meeting of the Graduate Nurses' Association of Des Moines, Ia., the following resolutions were adopted:

"WHEREAS, An All-wise Providence has removed from our midst a valued friend and member; therefore be it

"Resolved, That we extend to Miss Arthur's family our heartfelt sympathy.

"Resolved, That a copy of these resolutions be sent to her family, her aunt, Mrs. Miller, to THE AMERICAN JOURNAL OF NURSING, and recorded upon the minutes of the association.

"EDITH M. ROBINSON,

"LELLIAN FOWELL,

"BERNIE M. HARRIS,

"Committee."

MISS LAURA WOOD, graduate of the Protestant Hospital, Columbus, O., died of appendicitis at the hospital.

Miss Wood had just entered upon this field of work, having graduated February 4, 1905, since which time she has successfully discharged the duties of

her profession. She had just been accepted as a member of the Alumni Association, and we as a body deeply regret the loss of an efficient and conscientious worker. We extend our heartfelt sympathy to her family and friends, and record it in the minutes of the association and THE AMERICAN JOURNAL OF NURSING.

BELLE SNODGRASS,
NORINE JOHNSON,
MARY A. GRENER,
Committee.

At the May meeting of the Epiphany Branch of the Guild of St. Barnabas for Nurses announcement was made of the death of Fanny E. King on Saturday, May 13, at St. Anthony's Hospital, Chicago.

A committee was appointed to draft suitable resolutions. Miss King was a graduate of the Nicholls Hospital, Peterboro, Ontario, Class of 1904. After graduating she practiced successfully in Chicago until the beginning of this year, when her failing health almost wholly confined her to her home. The burial took place at her old home, St. Catharine's, Ontario.

On May 6, in Baltimore, Sara Gordon Macdonald.

Miss Macdonald was a Canadian by birth, graduate of Johns Hopkins, Class of 1898, and for many years a resident of Paris. Services were held in the Johns Hopkins Nurses' Club before the body was taken to Canada.

MISS HARMET DE HAVEN, November 28, 1904, Pittsburg, Pa.

Miss de Haven was a graduate of the Long Island College Hospital Training School, Class of 1903.



HOSPITAL AND TRAINING-SCHOOL ITEMS



HOSPITALS

OPENING OF A NEW WARD FOR CHILDREN.—The *Hospital Leaflet* for June of the Rochester Homoeopathic Hospital says:

"At last our hospital is in proud possession of a sweet, sanitary abiding-place for sick children. Our new Children's Ward was formally opened to the public on Thursday afternoon, June 1, from three to six. The day was exquisite with the fresh, tender beauty of spring, the rooms filled with flowers and guests, and all the poetic things one could say about it would not seem extravagant with the lovely reality before you. The dainty white beds so skillfully constructed to be raised and lowered for surgical treatment were decorated with wreaths of snowballs, and the little bassinets for the babies had their white hangings looped with blue satin ribbons. A delightful toy was on each little bed, pretty white curtains softened the sunlight which poured in through the generous windows, and on the walls hung the pictures of entrancing cats and dogs and all the animals that children love. All the practical appointments, the diet kitchen, linen-closets, and bath, the solid asphaltum floors, and the ventilation are quite perfect, and the interest centred especially in the nursery, or play-room for the little convalescents, which opens on a broad piazza, with a charming outlook through the hospital grounds. A stand of blooming plants, with a bowl of goldfish, fills one large window space, and near it is the big, square couch, very low and broad, covered with pretty chintz, where the feeble children can bask in the sun. A fine Braun photograph of theistine Madonna, a gift of one of the supervisors, looks down from the wall, and a beautiful Madonna of Luccadella Robbia's was part of the original gift of the room. A long, low table surrounded with small chairs and set with pretty white and blue ware is where the little convalescents will take their meals, after which they will rock in the little rocking-chairs, which are so broad and low that they cannot tip over. In the corner is a clever and charming surprise—a music-box—sent by the chairman of the Children's Ward Committee. Its lively tinkle on the afternoon of the reception made some foolish people think as they came in that there was an orchestra in attendance.

"A brass tablet records that 'These wards are given and furnished in loving memory of Mrs. Hiram Sibley and her granddaughter, Margaret Harper Sibley.' The dedication of this beautiful and generous gift so thoughtfully and tastefully appointed will take place on Monday afternoon, June 12, at four o'clock, after the monthly meeting."

On "Hospital Saturday" in Grand Rapids, Mich., the sum of thirty-three hundred dollars was raised. It is divided between the U. R. A. and Butterworth Hospitals.

TRAINING-SCHOOL NOTES

THE graduating exercises of the Class of 1905 of the New England Hospital for Women and Children, Boston, Mass., were held at the hospital on May 18, beginning at four P.M.

The directors' parlors were prettily decorated with flowers and plants, and were well filled with guests, mostly friends of the nurses. The large class of graduates made a fine appearance in their becoming white gowns and caps.

Miss Kimball, president of the hospital, opened the exercises with a few appropriate remarks, speaking especially of the loss to us all in the death of Mrs. Edward D. Cheney, for so many years the beloved president of the hospital and head of the Training-School Committee. A year ago she presided at the graduating exercises.

Miss Kimball then introduced Rev. Edward Everett Hale, who addressed the class in a most interesting and delightful manner. Of the maxims which he gave them for success and happiness in life, the chief was to have an avocation as well as a vocation, to broaden their own lives, and the lives of those with whom they would come in contact by keeping alive to the interests of the world and to nature.

Dr. West emphasized the same point in telling them to look at life in a large way, not to lose the broader sense of living in a too close devotion to their profession.

Both addresses had much of inspiration for all who listened as well as for the nurses.

Miss Kimball presented the diplomas, and to each graduate she also handed a bunch of beautiful pink roses from a generous basketful on the table before her, and said a few pleasant words. The roses were the gift of Mrs. Baker, a member of the Training-School Committee, and to each bunch was fastened a card with the inscription, "In memory of Mrs. Cheney." It was a beautiful and loving tribute to one who was always a loyal friend to the nurses. This charming feature of the exercises and the distinguished presence of Dr. Hale made the day one to be long remembered.

At the close of the exercises, the day being too cool for a party on the lawn, the company adjourned to the Kimball Cottage, where a simple collation was served and a pleasant social hour enjoyed.

The members of the graduating class were: Misses Gertrude du Vernet, Margaret McCarthy, Mary Priest, Laura Beaton, Mary Myers, Georgena Stoddard, Susan MacRae, Satis Erskine, Margaret McNeil, Alice Porter, Sybilla Haviland, Annie Maguire, Lena Fiske.

TWENTY THOUSAND DOLLARS FOR MT. SINAI NURSES.—With the object of offering an inducement to the pupils of the Mt. Sinai Training-School for Nurses to obtain the highest possible proficiency, Mr. Murry Guggenheim has established a fund of twenty thousand dollars, the income from which shall be applied to create twelve scholarships of one hundred dollars each annually, subject to the following regulations and conditions:

First.—Six of these scholarships to be assigned to junior pupils, three to senior pupils, and three to members of the graduating class. By the attainment of suitable proficiency any nurse can secure all three scholarships during the term of her tuition.

Second.—The scholarships to be awarded at the annual graduation exercises, taking place in May of each year, together with a pin for each graduating nurse securing one or more scholarships, engraved, "Murry Guggenheim Scholarship," together with the numerals indicating the year or years in which the scholarship was secured.

Third.—Scholarships to be awarded to those nurses in each class who shall

have displayed the highest degree of proficiency in accordance with the existing method of rating.

Fourth.—The fund to be known as the "Murry Guggenheim Scholarship Fund."

THE eleventh commencement of the School of Nursing of the Presbyterian Hospital, New York City, took place on May 11, 1905, in Florence Nightingale Hall. The graduation ceremonies and the reception following were of unusual interest this year, being the first to be celebrated in the beautiful new building that is the gift to the school of Mr. John S. Kennedy. The most interesting number on the evening's programme was the address by Dr. S. Weir Mitchell, of Philadelphia. Dr. Mitchell, knowing his subject as no one else could, and appreciating it as few others would, mingled in it much kindly criticism, wholesome advice, and humorous anecdote. The Class of 1905, in whose honor Dr. Mitchell spoke, numbers twenty-eight members, who go out from their "alma mater" almost as a body to continue their profession.

The floral decorations were very beautiful and appropriate. Music was furnished by the Mendelssohn Quartette. The presentation of diplomas was made by Mr. John S. Kennedy, president of the Board of Managers. Mr. Frederick Sturges, chairman of the School Committee, presented the pins with a few well-chosen words of cheer and encouragement.

THE Class of 1905 were welcomed into the Presbyterian Hospital Alumnae Association by a dinner given in the American dining-room of the Manhattan Hotel. The decorations were in the school colors, blue and white, consisting of immense ribbon-bows and streamers with white tulips and forget-me-nots.

The graduating class were seated at two long tables surrounded by four smaller round tables which were occupied by the members of the alumnae and their guest. Dr. B. Van D. Hodges, of Plainfield, N. J., formerly a member of the Presbyterian Hospital house staff, made an admirable toast-master, introducing each speaker with clever anecdotes and repartee. Among the guests were Miss Goodrich, superintendent of the New York Hospital Training-School, whose account of their club-house, established by their alumnae, was listened to with great interest.

Dr. C. Irving Fisher, member of the attending staff and the past and present house staff, was present.

Great credit and thanks are due to Miss McArthur and her associates for successfully planning such a delightful evening.

THE commencement exercises in connection with the School of Nursing of the Butterworth Hospital, Grand Rapids, were held in the Fountain Street Baptist Church, May 18. The address to the graduates was delivered by Dr. J. B. Whinery. It was most instructive and showed the keen interest taken in the educational work of the nurses. Diplomas were presented by Dr. G. K. Johnson to the following nurses: Lucila F. Beakstahler, Beatrice Graham, Jeanette Boer, Katherine M. Currie, Mary Marshall. Mr. Edward Lowe, president of the Board of Trustees, pinned on the badges. The annual report, which showed the school was in a flourishing condition, was read by Miss Elizabeth G. Flaws, superintendent. A pleasing innovation was the elder graduates of the school appearing in their pretty white uniforms, which lent an attractiveness to the scene that the uniform of the nurse always tends to produce. The graduates were presented by their friends with many beautiful flowers, which were dis-

tributed after the exercises. The following day Mrs. Eugene Boise, president of the board, held a reception for the nurses at the Country Club.

THE annual graduating exercises in connection with the Collingwood, Ont., General and Marine Hospital Training-School for Nurses were held in the new wing on Friday, June 2. Mrs. W. J. Bassett, president of the Women's Board of Management, presided, and gave a very able address of welcome to the guests. Dr. Aylsworth, president of the medical staff, addressed the graduating class in well-chosen, helpful words, inspiring them to a high ideal of duty. The diplomas were presented by Mrs. Bassett. The medals were the gift of Mrs. Eitt, patroness of the school, who pinned them on the graduating class. The class pin was given by Miss Morton, superintendent of the school. Miss Morton was presented with a beautiful bunch of crimson roses by the Alumnae Association of the Training-School, whilst lovely bouquets of dark crimson carnations tied with ribbon of the same shade (the school color) were presented to the graduating class by the medical staff. The graduates are Miss Gerald Morton, Miss Annie Norris, Miss Mary Robinson, Miss Etta Nelson, Miss Mary Lord, and Miss Bertha Klincher.

THE graduating exercises of Victoria Hospital Training-School, London, Ont., were held on May 31 in the auditorium. The following were presented with their diplomas and medals by Mr. S. Screaton, chairman of the Trust: Eva Lovina Bond, Ethel M. Fraser, Edythe T. Fredin, Isabel I. Hutchinson, Florence Mae Magill, Miriam Sharpe, Jessie Kenward Smith, Lizzie Thom, Annie Burnett Wall, Frances Vera Whitney. Before receiving their diplomas the graduating class repeated standing the Nightingale pledge. The new Nurses' Home, built by the city of London for the pupils in training, was at the same time declared open by the Mayor, Dr. A. T. Campbell. One of the most important features of the home is that it contains individual bedrooms, sixty-three in all, and is well equipped with lavatories, sitting-rooms, a dining-room, laundry, and kitchen.

THE seventh annual commencement of the Epworth Training-School for Nurses, South Bend, Ind., was held on the evening of April 28 at the Auditorium Annex. Dr. Robert B. Dagdale addressed the graduating class, and the president, Mrs. George M. Studebaker, awarded the diplomas. The exercises were followed by a reception from nine to eleven P.M. The class was the first to complete the new three-year course, and consisted of Misses Maude Cottrell, Carrie Castleman, Mary Feasel, Zilpha Whitney, Bessie Graham, Fannie Brooks, and Agnes Moran.

THE Illinois Training-School for Nurses graduated its twenty-fifth class on Wednesday, May 31. The annual alumnae banquet, with the Class of 1905 as guests, occurring the same evening at the Meridian Club, Chicago. At the Casa Grande, in Pasadena, also occurred the second annual banquet of the "California Delegation of the Illinois Training-School," twenty-seven in number.

THE Blessing Hospital Training-School of Quincy, Ill., graduated a class of four nurses on Friday evening, May 19, 1905. The exercises were held in the Vermont Street Methodist Episcopal Church in the presence of a large number of friends. The members of the class were Misses A. A. Likes, Elizabeth A. Shaw, Cordelia Eberhardt, and Mrs. Jennie E. Yowell.

THE Kings County Hospital Training-School for Nurses of Brooklyn, at the sixth annual graduating exercises, held June 7, 1908, presented the diploma and badge of the school to nineteen young women who comprised the Class of 1908. The exercises were held in the chapel in the afternoon, followed by a banquet given to the graduating class.

THE graduation of the Jamestown (N. Y.) Hospital Training-School took place June 1, the graduates being Grace Cooper, Vera De Mille Eaton, Agnes Elizabeth Carruthers, and Annie Armstrong Marshall.

THE Board of Managers of the Training-School for Men Nurses connected with Bellevue Hospital gave a reception to the graduating class on Wednesday evening, May 31, at 431 East Twenty-sixth Street.

THE graduating exercises of the Faulkner Hospital Training-School of Jamaica Plain, Mass., occurred at the hospital on Friday, June 9.

THE graduating exercises of the Rochester Homoeopathic Training-School for Nurses took place June 8.

COMMENCEMENT exercises of St. Mary's Hospital Training-School of Brooklyn took place May 18.

PERSONAL

MISS DOCK returned from Europe about June 1 after an absence of two years, during which time the JOURNAL's readers have been greatly indebted to her for a series of interesting papers upon nursing and nurses abroad.

It is to be hoped these papers may be put into permanent form; they are too valuable to be separated. In book form they may descend to future generations of nurses, who will rise up and call Miss Dock blessed for her enormous labors.

We voice the sentiment of nurses from every part of the country in bidding Miss Dock welcome home and expressing regret that she was not with us in Washington.

MISS PALMER is taking a much-needed holiday in the West, visiting the Yellowstone, the Lewis and Clark Exposition, and California with her sister, Miss Ida Palmer. Aside from our personal pleasure in wishing her a delightful experience and complete return to health and vigor, we may have the more selfish pleasure in the assurance that her nearer acquaintance with nurses and nursing affairs on the Pacific coast will afford us much that is pleasant and profitable through the pages of the JOURNAL.

Already numerous efforts have been made to secure Miss Palmer to address various nursing organizations, and also offers to extend hospitality to her during her visit.

MISS ALICE FRANKEL has been made superintendent of nurses at the new Mt. Sinai Hospital in Philadelphia, taking charge in April. Miss Frankel graduated from the Johns Hopkins Training-School, Class of 1899, and has ever since been at her home in Louisville, Ky.

MISS MINNIE ARRENS, a graduate of the Illinois Training-School and of the Class of 1904 of Hospital Economics, Columbia University, has recently been appointed superintendent of the Provident Hospital Training-School in Chicago.

MISS MARIE GOSTER, Johns Hopkins Alumnae Association, has resigned her charge of the Training-School of the Cambridge (Md.) Hospital, where she has been for several years, and returned to Baltimore.

MISS EDITH MADEIRA, Johns Hopkins, Class of 1900, lately doing district work in Philadelphia, has been made superintendent of nurses at the Howard Hospital, Philadelphia, and began her work May 1.

MISS E. MAY MURPHY, Class of 1904, St. Luke's, South Bethlehem, who has been quite ill with scarlet fever, contracted while nursing a case, is very much improved and a speedy recovery is hoped for.

MISS CORA WARREN and Miss Rosa, graduates of the Butterworth Hospital, Grand Rapids, leave about July 1 to take a three-months' course in the Boston Floating Hospital.

MISS MARGARET O'GRADY, Johns Hopkins, Class of 1899, has taken charge of the Sanatorium for Children at Mt. Wilson, Md., for this summer.

MISS BRECKENBRIDGE, of the Union Protestant Infirmary, Baltimore, has become superintendent of nurses at the Cambridge Hospital.



CHANGES IN THE ARMY NURSE CORPS



CHANGES IN THE ARMY NURSE CORPS RECORDED IN THE SURGEON-GENERAL'S OFFICE FOR THE MONTH ENDING JUNE 13, 1903.

Brown, Sidney, formerly on duty at the General Hospital, Presidio, San Francisco, discharged.

Chambers, Elizabeth F. M., transferred from the Division Hospital, Manila, to Zamboanga, P. I.

Clark, Louisa Peyton, graduate of the Presbyterian Hospital, Philadelphia, 1902, appointed and assigned to duty at the General Hospital, Presidio, San Francisco.

Connors, Katharine, formerly on duty at the General Hospital, Fort Bayard, N. M., discharged. Now on duty in one of the hospitals at Panama.

Daly, Annie A., transferred from the Division Hospital, Manila, P. I., to the United States transport Thomas, arrived in San Francisco June 12, under orders for one month's leave and then discharge.

Griggs, Edith Young, transferred from the Convalescent Hospital, Corregidor Island, to the Division Hospital, Manila, P. I.

Hally, Mary C., transferred from the Convalescent Hospital, Corregidor Island, to the Division Hospital, Manila, P. I.

Hine, M. Estelle, transferred from the General Hospital, Fort Bayard, N. M., to the General Hospital, Presidio, San Francisco, Cal.

Kennedy, Mary J., transferred from the General Hospital, Presidio, San Francisco, Cal., to the General Hospital, Fort Bayard, N. M.

Meuser, Grotta Belle, transferred from the Division Hospital, Manila, P. I., to San Francisco on the Logan, assigned to regular duty at the General Hospital, Presidio, having arrived there on May 18.

Patterson, Emma Bestwick, graduate of the New York Post Graduate Hospital, 1899, appointed and assigned to duty at the General Hospital, Presidio, San Francisco.

Sprouse, Frances Pierce, graduate of the Erie County Hospital, Class of 1904, appointed and assigned to duty at the General Hospital, Presidio, San Francisco.

Wattie, Jessie, transferred from the Division Hospital, Manila, P. I., to the United States transport Thomas, arrived in San Francisco June 12, under orders for one month's leave and then discharge.



EIGHTH ANNUAL CONVENTION

OF THE

**Nurses' Associated Alumnæ
of the United States**

HELD IN

GEORGE WASHINGTON UNIVERSITY

WASHINGTON, D. C.

May 4 and 5, 1905



MINUTES OF THE PROCEEDINGS

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MRS. WHITELAW REID.

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MISS ANNIE W. GOODRICH,

MISS M. ADELAIDE NUTTING,

MISS M. E. P. DAVIS.

Programme.

MISS MARY M. RIDDLE,

MISS SOPHIA F. PALMER,

MISS MOLLIE MOLLOY,

MISS GEORGIA M. NEVINS,

MISS IDORA ROSE.

Printing.

MISS NELLIE M. CASEY,

MISS MARY E. THORNTON,

MISS M. E. P. DAVIS.

Census.

MISS ALICE O. TIFFET.

Delegates Registered

May 3 and 4, 1905

TRAINING-SCHOOL ALUMNAE OF THE	
Allegheny General	Mrs. BLANCHE FISHER (2 votes).
Augustana, Chicago	" JOHANNA NELSON.
Baltimore City	" ELEANOR PARKER.
	Mrs. MARY BOHLING.
Bellevue, New York	Mrs. MARY A. MINER.
	" ELIZABETH M. READING.
	" ANNIE EMOORE.
	" ALMA C. BOGLE.
Boston City	" BESSIE F. WATKINS.
	" MARTHA W. WICK.
	" ANNE C. PARKER.
	" MINNA WOLFF (7 votes).
Boston and Massachusetts General	" ANNIE C. CARLISLE.
	" NINNIE S. HOLLINGSWORTH.
	" ALICE G. TIFFET (4 votes).
Brooklyn	" ELIZABETH DEWEY.
Brooklyn Homeopathic	" LINA LIGHTBOURN.
Buffalo General	" ANNA LOWELL ALLIN.
Chicago Baptist	" EMMA ROTHFUS (2 votes).
Children's, Boston	
Children's, San Francisco	" FLORENCE J. CARTHEW.
	" QUEENLIAN BLETCHEN.
City and County, St. Paul	" ELIZABETH M. HEWITT.
Columbia and Children's, Washington	Mrs. M. M. DAVIS.
Erie County, Buffalo	Mrs. LULU B. DURKEE.
Farrand, Detroit	" MARY E. SMITH.
Faxton, Utica	" IVY L. FAIRCHILD.
Freedmen's, Washington	Mrs. SARA I. FLEETWOOD.
Garfield Memorial, Washington	Mrs. HELEN W. GARDNER.
German, New York	" EMMA DUNNING.
	" LAVINIA E. CHAPMAN.
Germantown, Philadelphia	" MARY C. FELTER.
Grace, Detroit	" JENNIE LENNOX.
Hahnemann, Chicago	" CLARA S. LORD.
Hahnemann, Philadelphia	" LOUETTA E. CORNISH.
Hartford	" HANNAN L. RUSSELL.
	" EDNA L. FOLEY.
Hope, Fort Wayne	" FLO. CONKLIN.
Hospital of the Good Shepherd, Syracuse	Mrs. LEILA D. BROCKWAY.
House of Mercy, Pittsfield	Mrs. MARGARET A. MASTERSON.
Illinois, Chicago	" KATHARINE De WITT.
	" GRACE G. WATSON (6 votes).
Indianapolis City	" MARY S. SOLLERS.
Jefferson Medical, Philadelphia	" NELLIE A. CUMMISKEY.
Jewish, Philadelphia	" REBECCA R. HALASY.
	" GRACE O'BRYAN.
	" FLORENCE A. HUNT.
	" VIRGINIA L. McMASTER.
	" GERTRUDE A. MILLER.
	" EMMA THELIN (6 votes).
Johns Hopkins, Baltimore	" ROBERTA E. YEOG.
Kings County, Brooklyn	
Lakeside, Chicago	" MARQUERITE CLANCY.
Lakeside, Cleveland	" ANNA DAVIDS (3 votes).
Lebanon, New York	" AMELIA L. SMITH.
Long Island College, Brooklyn	
Maine General, Portland	

TRAINING-SCHOOL ALUMNAE OF THE

Maryland General, Baltimore	Miss LILLIE KOHLMAN.
Maryland Homoeopathic, Baltimore	" ELIZABETH J. TISDALE.
Massachusetts Homoeopathic, Boston	" SUSAN E. TRACY.
Massachusetts State, Tewksbury	" CHLOE JACKSON.
Massy, Chicago	" VICTORIA ANDERSON.
Methodist Episcopal, Brooklyn	" MARY E. ELLIS.
Methodist Episcopal, Philadelphia	" ANNA E. WETHERILL.
Michael Reese, Chicago	" MARY E. HAYES.
Mt. Sinai, New York	Miss JENNIE GREENTHAL.
National Homoeopathic, Washington	" FRIDA L. HARTMAN.
Newport	" SUSIE SHILLADY.
Newton	Mrs. FRANCIS P. BROWN.
New England, Roxbury	Miss IDA R. PALMER.
New Haven	" H. E. McAFEE.
New York	Mrs. MARY C. HALL.
"	Miss LOUISE A. FERBER.
"	" ROSE M. HEAVREN.
"	" ANNIE W. GOODRICH.
"	" MARTHA M. RUSSELL.
"	" MARGARET M. RYERSON.
"	" MARY A. SAMUEL (5 votes).
"	" ELLA V. BURR.
New York City	Mrs. PHOEBE I. MITCHELL.
"	Miss THEODORA H. LE FEBVRE.
"	" J. AMANDA SILVER.
"	" IRENE B. YOCUM.
New York Post-Graduate	" MARGARET ANDERSON.
"	" ANNA M. CHARLTON.
"	" CHARLOTTE EHRLICHER.
"	" CASTELLA C. FRALEIGH.
North Adams	Mrs. A. C. DONICA.
Old Dominion	Miss JULIA IRVING SCOTT.
Orange Memorial	" SARA COOMBER.
Patenon General	" CORA H. SWANN.
Pennsylvania, Philadelphia	" FRANCES K. OSBORNE.
"	" ALICE M. GARRETT.
"	" NELLIE F. RAYE.
Philadelphia	" ANNA M. RINDLAUB.
"	" FLORENCE WARBURTON.
Philadelphia Polyclinic	Mrs. SARA M. WARMUTH.
"	Miss GEORGIANA J. SANDERS
"	(1 proxy vote).
Pittsburg Homoeopathic	" IDA F. GILES.
"	" R. BELLE JONES.
Presbyterian, New York	" NANCY E. CADMUS.
"	" MARGARET A. BEWLEY (3 votes).
Presbyterian, Philadelphia	" JENNIE A. WANLY.
"	" CAROLINE I. MILNE.
Protestant Episcopal, Philadelphia	" M. ELIZABETH HANSON.
"	" ANNIE C. MEDWILL.
"	" SARAH R. WILLARD.
Providence, Washington	" BESSIE DAYLY.
Provident, Chicago	" CONSTANCE V. CURTIS.
Randall	" BARBARA ROSS.
Rhode Island, Providence	" MARIETTA C. GARDINER (3 votes).
Rochester City	" MAE G. CONNER (2 votes).
Rochester Homoeopathic	" BERTHA M. SMITH.
Rosenvolt, New York	" NORA CHARLES (2 votes).
Salmon	" ALMIRA E. MacKINNON.
St. Barnabas, Minneapolis	" EMILY SEXTON.
St. Joseph's, Chicago	" MARY ST. C. MULHOLLAND.
St. Joseph's, Paterson	" HELEN BALCOM.
St. Joseph's, Philadelphia	" ELIZABETH FRANK.
St. Luke's, Chicago	" HARRIET FULMER.

730 Eighth Annual Convention Nurses' Associated Alumnae

St. Luke's, New Bedford	Miss ADA S. GRAHAM.
St. Luke's, New York	" REBECCA R. TOUPET (3 votes).
St. Luke's, St. Paul	" MARY WOOD.
St. Luke's, South Bethlehem	" SUSAN G. PARISH.
St. Mary's, Brooklyn	" CHRISTINE R. RUSSELL.
St. Mary's, Detroit	
State, Scranton	
Toledo	" AILEEN J. TURNER.
Union Benevolent Association, Grand Rapids	" FANNIE T. BOUGH.
Union Protestant Infirmary, Baltimore	" M. E. BOLF.
University of Maryland, Baltimore	" V. C. WETZEL.
University of Michigan, Ann Arbor	" IDA M. TRACY.
University of Pennsylvania, Philadelphia	" CAROLYN T. DUKE.
	" LYDIA A. GIBBSON.
	" EMMA E. LEVAN.
Virginia, Richmond	" AGNES D. RANDOLPH.
Wesley, Chicago	
Western Pennsylvania, Pittsburgh	" MARY J. WEIR.
Wilkes-Barre	" CAROLINE LEWIS.
Williamsport	
Worcester City	" SARAH L. KOURSE (2 votes).

STATE ORGANIZATIONS.

A State organization shall become affiliated with this association by sending one delegate at large and the payment of annual dues of five dollars. Its secretary shall send annually a copy of its constitution and by-laws, with the names of its officers and members, to the secretary of this association, who shall transmit it to the Executive Committee.

DELEGATES REGISTERED.

May 3 and 4, 1905.

District of Columbia, The Graduate Nurses' Association of the	Miss LILY KANELY.
Illinois State Association of Graduate Nurses	" HARRIET FULMER (Proxy for Mrs. Ida M. Tice, Delegate).
Indiana State Nurses' Association, The	" FLORENCE M. GRANT.
Maryland State Association of Graduate Nurses, The	" SARAH F. MARTIN.
Massachusetts State Nurses' Association, The	" M. E. F. DAVIS.
Michigan State Nurses' Association, The	" IDA M. BARRETT.
New York State Nurses' Association, The	" M. E. CAMERON.
Ohio State Association of Graduate Nurses	" MARY HAMER GREENWOOD.
Virginia, The Graduate Nurses' Association of	Mrs. LEAH DE LANCEY HANGER.

Total, 99 Alumnae Associations; 9 State Associations; 142 delegates; 151 votes and 1 Proxy.

THE PROCEEDINGS OF THE EIGHTH ANNUAL CONVENTION

WASHINGTON, MAY 4 AND 5, 1905

Wednesday, May 3, 1905.

At eight-thirty A.M. the registration books were open and the secretary and treasurer in attendance until time for the delegates to assemble for the meeting of the American Federation of Nurses.

Thursday, May 4, 1905.

Eight-thirty A.M.—The presentation of credentials, registration of delegates, and payment of annual dues concluded.

At ten o'clock the president, Miss Mary M. Riddle, took the chair and declared the Eighth Annual Convention of the Nurses' Associated Alumnae of the United States formally opened.

Roll-call by the secretary showed one hundred and thirty-three delegates to be present from alumnae associations and nine from State organizations.

The president then called the attention of the assembly to a matter of some importance which would be presented before going on with the routine business.

Miss WHITTAKER—I move that the Associated Alumnae be empowered to hold its meeting at this time, May 4 and 5.

Motion seconded by Miss Damer. Carried.

PRESIDENT.—Possibly some member would appreciate an explanation of this action.

Miss KEATING.—I think we should be glad to hear of the reason.

PRESIDENT.—I shall ask Miss Damer to make a short explanation.

Miss DAMER.—By way of explanation of this motion I would say that our incorporation papers require the association to hold its meetings on the first three days of May, and it was impossible for us to have those days this week, so this is merely a matter of form; that by the unanimous vote of the association we hold our meetings to-day just to make it entirely legal, and that is why that motion has been made, so that we can begin our convention on the fourth day of May instead of the first day of May. By the unanimous vote of the assembly here it is entirely legal.

Miss Riddle then addressed the members of the association as follows:

ADDRESS BY THE PRESIDENT

"MEMBERS OF THE NURSES' ASSOCIATED ALUMNAE: It is my great pleasure to again appear before you and open this your eighth annual convention, where we trust may be deliberated, discussed, and solved those problems which shall decide your policy and usefulness for the year upon which you now enter.

"You have had a glorious past, you have lived up to the measure of faith reposed in you, and, judging from the number and attitude of those now before me, it seems just to conclude there has been during

the year no abatement of interest in the questions agitating the minds and hearts of all members of our profession in this broad land.

"It has been our custom to laud our own efforts to some extent. To-day we can devote but the briefest time to that. We must let our past stand as it is and let our future come as it will. We may, however, be allowed to gather inspiration for renewed and continued effort by casting our eyes over the history of nursing in this country as written in the annals of the Associated Alumnae.

"One of the leading reflections to which this anniversary seems to invite us respects the changes that have taken place in the nursing profession since the formation of your society. In looking at these changes and estimating their effect upon our condition we are obliged to consider not what has been done in this society only, but also that which has been done in other nursing organizations receiving much of their impetus here.

"We find that but for the support and encouragement given by this association and others of its kind, nurses in many communities would hardly have come out for themselves sufficiently even to establish directories and clubs of their own. We have seen them in some cities hesitating and wavering lest this important step be misconstrued and they be ostracised or boycotted for such rank independence. By reason of the inspiration delegates of local associations received here the strength for such work grew, as did, ultimately, the work under their hands, until to-day nurses' directories managed by nurses are so assured and so definitely a part of the equipment for the proper transaction of business that they seem always to have belonged to the nurses; and this change has come about in much less than one decade, for we find our predecessors discussing here the possibilities for such advancement within a much shorter period.

"Again, so extraordinary has been the progress of the last few years that within a very recent period we find them also discussing here a preliminary or preparatory course for nurses. So intent were they upon procuring this and so satisfactory did it prove where tried that other schools of learning are now found considering the propriety of making it a part of their curricula, and some have even gone so far as to make the practical experiment. Thus we see that in this, as in many other instances, the members of the two greatest and most influential nursing organizations planted well—possibly better than they knew, but, like many individual originators, they to-day are scarcely credited with being the originators or with having first placed the possibilities for such advancement before their societies. But however that may be, results certainly justify the wisdom of their proposals.

"So we might go on and on enumerating what has been accomplished by the Associated Alumnae. But there is one accomplishment that outweighs all others, and that is the fact that here is a society that has proved the school where have been drilled and incited the possible members of other organizations. Here, no doubt, State societies were first conceived, and here they must have received in large measure their sympathy and moral support, and who shall say that that very sympathy and moral support may not have been a real source of strength to the pioneers in obtaining registration for nurses and the recognition of our profession by the State?

"We have as one of the avowed objects of this association that it shall strengthen the union of nursing organizations. To those organizations that have labored so assiduously during the year to procure State registration and have met with but indifferent success or downright failure it is a great comfort to reflect that here at least is sympathy, here will be met a complete understanding.

"Might we not by our earnestness and *esprit de corps* stand so closely together as to form a solid wall upon which may lean those State societies that find arrayed against them and their efforts an extremely conservative public, an antagonistic medical profession, and an indifferent nursing body. Let us hope that each and every such society is represented here to-day by a good, live delegate who shall gather inspiration for a most active home missionary service upon her return. The delegate who comes here and returns imbued with the spirit of progress and a will to work must be living up to a certain measure of her responsibilities. Her local alumnae possibly denied itself much that its delegate be sent to this convention, and why? Simply because it felt the need of intercourse with other workers of the same class and could neither come here nor call this body there, hence the chosen representative.

"Doubtless it was understood she should make this as much of an outing for herself as would be compatible with opportunities for doing the business that caused her to come here and that should rightfully be transacted before any indulgence in pleasure. It is to be hoped the local societies will require more of their delegates than detailed reports of business done and papers read and accounts of sights seen and festivities participated in. If they have needs and realize them, it is to be hoped they will arise en masse and demand that the delegates advise them according to instruction and knowledge gained here. Possibly a delegate has come requiring a definite solution for a vexing problem. Then let her not hesitate to seek her answer here and continue her search until the result meets the need. To this end she will be promptly

in her place when the sessions open, and she will remain with concentrated attention until they close, and we trust she will be ready to make her requests and propound her questions when the opportunity is given.

"By meeting these seekers in the proper way and considering their questions in a helpful spirit shall we be in some degree *strengthening* the union of nursing organizations, and, members of this convention here assembled, let me say to you that there is great need of it to-day.

"Nurses all over the land are asking for much, so much and so earnestly definitely and well that legislators halt before them and, it may be, set the seal of disapproval upon their efforts from sheer astonishment at what seems like audacity from its very uniqueness and scope.

"But notwithstanding the realization of the nurses' hopes have in many cases been thus postponed, they have been found to be a power and an element to be treated with.

"There have also arisen many prophets who would lead them into the promised land. It is said that someone has called the new movement in England the limited liability company to train, register, and control nurses. Some of these self-constituted leaders hold out to the nurses the possibility of the realization of that much cherished desire,—viz., educational advancement,—knowing that nothing appeals more strongly to the average nurse to-day.

"Not all of these newly arisen leaders are insincere or self-seeking. Some there be who truly have the interest of the nursing profession at heart and have much to offer in the way of advice, intelligence, and authority. But others have a system to defend or an interest to advance, and can see their way clear for the accomplishment of their purpose by proposing or opposing, or cajoling or threatening, or possibly by disrupting existing organizations, as occasion may demand. Now, it becomes the duty of this great body of nurses to be a unit in standing by its principles and its traditions so firmly that its influence shall be felt to the uttermost local alumnae or affiliated State society, and it can be done if each delegate feels it incumbent upon herself to go hence and spread the gospel of unity and progress. It is as true to-day of us as it ever was of our country—that 'united we stand, divided we fall.'

"These words are not spoken because there is any evidence anywhere that this association is swerving from its principles, but as a note of warning for the delegates to take with them against that which may arise under the guise of help or philanthropy or what not and calls for a departure from the old path. Not that we should forever remain treading in any one way,—lest we be narrow and cease to progress; such a course would be contrary to the spirit of our originators or the precepts they promulgated,—but we must consider carefully and decide

wisely what is to be for the best good of the nursing profession in this country—in short, we must be very thoughtful. In order to accomplish this our eyes must be open that we may select the gold from the dross, that we may know our wise teachers and leaders from the unwise, and that we may act accordingly.

"This we must do with a spirit of charity for all and malice for none. We must not and will not spurn the learning nor theories of those who have given much time and thought to the advancement of our beloved calling, but we will yet, with possibly wholesome and trusted advice, decide for ourselves what is best to accept and what to reject.

"As the years have gone on you have had before you many questions for adjustment—among others, the ownership of the *JOURNAL*. You will no doubt hear from the committee of your selection last year just what your relations to that organ are and may be expected to be henceforth.

"Your duty to the *JOURNAL* is, however, an unceasing one, and may be manifested by the way in which you support it by your subscriptions. We have no hesitation in saying to you, and through you to your home alumnae associations, that you should subscribe for the *JOURNAL* if you have not already done so. This is not because the *JOURNAL* needs you more than you need the *JOURNAL*. You will have more than value received for your investment, and it is the only organ of its kind in this or any other country published by nurses for nurses.

"For years our senior society, that of the Superintendents of Training-Schools, has been agitating the question of how to procure skilled nursing service for people of limited means. They are still weighing the pros and cons, hoping to arrive at a solution which shall be a just one to both patient and nurse. They have been our directors in many matters, but when we seek the actual workers, those who must do the nursing work, we find them in this great body. Might not this, then, be a question to properly enlist the attention of alumnae associations and clubs of graduate nurses? Work of this kind is being done in some cities; might it not be worked out in others? Surely this class is as well worth our care as any other! As has been said, the millionaire is provided for, the very poor are provided for, but the great self-respecting middle class, the bone and sinew of our nation,—with pride we say our own class!—what can we do for them?

"We can and must do something. It is unfair that they be left to the mercy of schools which have no hesitation in deploring in the public prints the fact that they are handicapped during their first year's existence because their nurses' earnings cannot be great or sufficient to support the school. Why? We ask of you who have spent two, three,

or four years in training—why should nurses' earnings be great in their first year of training? I say, then, with what measure of devotion to our profession can we serve these people of our own class? Does the question appeal to you? does it merit your attention? Then take it home with you and seek its solution with your colleagues, remembering that concentrated human thought is the power by which human ends are ultimately attained.

"Disseminate any knowledge you may gain by successful experiments made, strengthen the hands of all earnest workers along the line, and it must transpire that good shall be accomplished.

"We point with pride to that other achievement of our senior society,—namely, the Course in Hospital Economics at Teachers College, Columbia University,—and we commend it to your thoughtful attention. It may lie within your power to aid it—and certainly you need not be reminded of the privilege accorded you in doing so. It has established its usefulness. It must survive as the fittest place where knowledge and learning such as it advances can be procured.

"To recapitulate, we have before us for our year's work the opportunity to assist by our moral support and otherwise those nursing organizations that are struggling for the realization of high ideals. When we consider the large number of nurses that take no interest in their professional affairs we realize that the local alumnae societies here represented will have ample scope for their time and talents. It has been truly said that the apathy of nurses themselves in regard to the matters which most closely concern them has often done more for their defeat than active opposition. This apathy can be overcome by the continued, persistent, patient, sympathetic, and concerted work of this large, interested body.

"Let us put it off now, this dread apathy, and stand forth in our vigor and firmness ready for the defence of our ideals, which must be cherished at the cost of any effort whatsoever. Then shall no other proof be needed that we are indeed an association that is associated, and for the advancement of the nursing profession.

"By reason of our sincere efforts there shall spring up splendid results. We may sow in weakness, but we shall be raised in strength.

"From our zeal for learning and knowledge opportunities shall arise which shall advance the nursing profession many paces into the van. There shall arise wise plans full of the enthusiasms which we ourselves breathe and the realization of which must bring to us the blessings of good work well done."

PRESIDENT.—We will now proceed with the business of the convention and call for the secretary's report.

The secretary reported as follows:

"**MADAM PRESIDENT:** May I call the attention of the delegates to the record of the proceedings of the seventh annual convention as issued in printed form in July last, and to the reprint of the most important business transacted at that convention, which is placed in their hands this morning in the shape of a constitution and by-laws?

"The preliminary meeting of the Board of Directors for the year 1904-1905 was held in the Hotel Westminster, New York, on October 21.

"The members of the committee present were Miss Damer, first vice-president; Miss Whitaker, second vice-president; Miss Casey, Miss Smith, Miss Nutting, Miss Melancon, and Miss Goodrich, of the Board of Directors, and Mary E. Thornton, secretary.

"Miss Riddle, the president; Miss Healy, the treasurer, and Miss Dolliver, of the Board of Directors, were unavoidably absent.

"In accordance with Section 2 of Article V. of the by-laws.—'The Board of Directors shall choose from its own members an Executive Committee of at least five, who shall meet as often as necessary and transact such business as may come before it. They shall report at the annual meetings'—the board appointed Miss Damer, Miss Whitaker, Miss Healy, Miss Goodrich, and Miss Thornton an Executive Committee. (According to the by-laws the president is an ex-officio member of all committees.)

"Miss Nevins having been appointed on the Committee of Arrangements, it was decided to ask her to select four members in Washington to serve on the committee with her.

"The Committee on Publication was formed, with Miss Damer, Miss Healy, and Miss Thornton.

"The Committee on Eligibility, with Miss Goodrich, Miss Melancon, Miss Nutting, Miss Dolliver, and Miss Hay.

"The Programme Committee, with Miss Nutting, Miss Casey, Miss Sly, Miss Damer, and Miss Nevins.

"It was decided at this meeting to give votes to the alumnae of the Faxon, of Utica; the Methodist Episcopal, of Philadelphia; the North Adams, of Massachusetts.

"The question of withdrawing from the National Council of Women and becoming affiliated with the International Council of Nurses as per the accompanying letter,—

"To the President and Members of the Committee, the American Federation of Nurses.

"**MADAM PRESIDENT AND MEMBERS:** At the recent meeting of the International Council of Nurses in Berlin, after hearing reports from different countries, and finding that England and Germany had formed organizations on national lines, the following motion was proposed by Miss Lela Stewart, seconded by Miss Dock, and carried unanimously:

"That invitations be officially sent to the American Federation of Nurses, the Provisional Committee of the National Council of Nurses of England, and the German Nurses' Association, inviting them to affiliate with the International Council of Nurses."

"I have great pleasure in transmitting this resolution to you and in asking you to act upon same, and in so doing may express the ardent hope it will be acted upon affirmatively. At no time since Miss Nightingale created a new order in nursing have nursing affairs been so intensely interesting as at present. In almost every European country some process of reform or regeneration is going on akin to our own effort for registration. In Italy three trained nurses, one English, one German, and one American, are bringing in the modern reforms and methods and are planting them in the midst of thousand-year-old customs. In France the monastic orders have been removed from the hospitals and the authorities are struggling with a perfectly enormous problem of education and training. Two demonstrations of the training of gentlemen as nurses

are being conducted there, one in Bordeaux and one in Paris, and, as in Italy, these small plants must be looked to to regenerate the rest.

"In Germany trained nursing has advanced far in discipline and in system, but largely under forms which have kept the nurses in a condition of entire dependency, and lately many of the intelligent and progressive ones among them, aided by the German Council of Women, have asserted their right to economic freedom, their right to organize and govern themselves after graduation, and have declared the necessity of a more uniform training and of State protection. This assertion of independence has been truly a revolution in Germany, and the leaders have had to endure contumely and persecution. In England the movement for State registration is meeting with bitter opposition in certain quarters. Such opposition as we have met at home will help us to understand the sources and motives of opposition here, as in all countries the problem is the same, only differing in degree but not in kind. In spite of the obstacles the State Society for Registration has waged a brilliant campaign and has succeeded in so arousing the public that a select committee of the House of Commons has been appointed to inquire into the subject. This committee is now taking evidence. To witness all these efforts drives one to the irresistible conclusion that mutual encouragement and support of one another is urgently demanded. In many ways Americans are in a better and more independent condition than the nurses of any European country. This being so, we may be of the greatest help to our struggling fellow-workers in their efforts at reform. Moral support alone is worth much, as we found in Germany, and as, with men of affairs, actual numbers count for much, every thousand, every hundred women even, that we can total up as being united in their requests and aims will help to bring about more quickly the reforms which each country is working for.

"With the hope that we shall soon have an effective union of national councils,

"Most sincerely yours,

J. L. Dock,

"Secretary.

"September 2, 1904."

—was brought up and the president reported a unanimous vote of the board in favor of such proceeding.

"It was decided to hold the meetings during the first week in May, and to devote one of the three days to a meeting of the American Federation of Nurses, arranging for necessary business, such as the registration of delegates, the receiving of annual dues, etc., early on that day.

"The Committee on Publication was authorized to proceed with the printing of the constitution and by-laws.

"On Friday, January 29, a meeting of the Executive Committee was called at the residence of the secretary, 509 West One-Hundred-and-Twenty-first Street, New York. The members of the committee present were Miss Riddle, Miss Damer, Miss Whitaker, and Miss Thornton, and Miss McLean, of the Board of Directors. Miss Healy and Miss Goodrich were ill and unable to attend.

"It was decided at this meeting to hold the annual meeting on May 4 and 5, leaving Wednesday, May 3, for the meeting of the American Federation of Nurses.

"The question of the advisability of making some definite ruling in regard to payment of bills incurred by the officers and various committees was discussed freely, and the members of the committee were agreed that it was very important to have some law governing such expenditures. The committee recommends that the meetings of the full Executive Board be held just after one convention and on the eve of the next, as at that time the members are easily assembled; in the case of the law governing the meeting of the Nominating Committee, "It shall be the duty of the Nominating Committee to meet at least one month before the annual meeting and to nominate two or more candidates for every office to be filled at the annual election," it would be well if the members of that committee too might arrange a meeting immediately after the adjournment of the annual convention, as most of the work of securing candidates must of necessity be done by correspondence, and by calling a meeting at

that time, providing members are where they can be summoned to attend, considerable expense would be saved and the law observed.

"The third and fourth executive meetings were called at the Hotel Shoreham, in Washington, May 2 and 3.

"The secretary presented an invitation received from the Spanish-American War Nurses requesting the honor of the presence of the officers and members of the Nurses' Associated Alumnae of the United States at the unveiling of the monument erected to the army nurses who died in the service of their country during the war with Spain, on Tuesday afternoon, May 2, 1906, at three o'clock, at Arlington Cemetery, Va., near Washington, D. C. Regret was expressed that the invitation could not be conveyed to the members in time to witness the ceremony.

"The board appointed Miss Caroline I. Milne judge of elections, Miss G. C. Ross and Miss Sadie Sly tellers.

"The secretary presented a letter from the Detroit Graduate Nurses' Association begging the honor of the Eighth Annual Convention for that city. The letter was placed on file pending the action of the delegates.

"The secretary reported the following applications received during the year and referred to the Committee on Eligibility:

"That of the alumnae of the Nurses' Training-School of the Bridgeport Hospital, membership seventy; the Children's, of Boston, forty-three; the City and County, St. Paul, forty-seven; the Indianapolis City, thirty-five; the Jefferson Medical College, of Philadelphia, fifty-one; the Lebanon, of New York, forty; the Maryland General, of Baltimore, forty; the Massachusetts State, of Tewksbury, forty-three; the National Homoeopathic, of Washington, thirty-two; the Newport, R. I., thirty-six; the Philadelphia Polyclinic, twenty-five; the Providence, of Washington, twenty-four; the Dr. Joseph Price's, of Philadelphia, fifteen; the St. Barnabas, of Minneapolis, thirty-one; the St. Mary's, of Detroit, thirty-five; the State Hospital of the Northern Anthracite Coal Region of Pennsylvania, Scranton, forty-five; the Union Benevolent Association Hospital, of Grand Rapids, thirty-two; the Wesley, of Chicago, thirty-two.

"[It shall be the duty of the Eligibility Committee to investigate the fitness of all nursing organizations applying for membership in this association. They shall report their findings to the Board of Directors, whose decisions as to eligibility shall be final.]

"The Board of Directors voted to withhold membership from the alumnae of the Dr. Joseph Price and the Bridgeport, as these were not endorsed by the committee. The others were admitted to all the privileges of the association.

"Miss State organizations had become affiliated: The Graduate Nurses' Association, of the District of Columbia; the Illinois State Association of Graduate Nurses; the Indiana State Nurses' Association; the Maryland State Association of Graduate Nurses; the Massachusetts State Nurses' Association; the Michigan State Nurses' Association; the New York State Nurses' Association; the Ohio State Association of Graduate Nurses; the Graduate Nurses' Association of Virginia.

"Respectfully submitted,

"MARY E. THORNTON."

On motion of Miss Palmer, seconded by Miss Melrose, the report of the secretary was accepted.

FINANCIAL.—The treasurer's report, which has been audited, will now be presented for your acceptance.

Miss Healy, the treasurer, then made the following report of the financial condition of the association:

TAMAR E. HEALY, treasurer, in account with the Nurses' Associated Alumnae of the United States,
May 12, 1904—May 3, 1905.

RECEIPTS.

Balance on hand May 12	\$872 71
Annual dues for 1904	\$610 90
Annual dues in advance for 1905	11 40
Initiation fees	55 00
Sale of Annual Reports	7 50
Sale of Bulletin Congress Reports	5 00
Sale of National Council pins	10 25
Interest on bank account to date	700 05
	10 70

DISBURSEMENTS.

Badges and ballots for Seventh Annual Convention	\$18 75
Printing of Constitution and By-laws	25 50
Expenses of Quorum Committee	3 65
Typewriting and reporting Seventh Annual Convention	25 25
President's expenses attending Seventh Annual Convention	25 00
Secretary's expenses attending Seventh Annual Convention	24 99
Treasurer's expenses attending Seventh Annual Convention	8 80
American Federation of Nurses, expenses of President	10 25
Periodical Committee, circulars, etc.	4 85
Committee on Education, reports and notices	3 00
Committee on purchase of Journal stock	1 10
Stamped stationery	10 74
Expenses two directors attending Executive Committee meeting	59 30
8 copies Convention Nurses Journal, and filing reports	2 20
Telephone messages for Convention	4 65
1 dozen National Council pins	8 00
Annual dues to National Council of Women	16 67
Typewriting notices for Eighth Annual Convention	5 65
Stamps, stationery, and exchange for treasurer	5 33
Current expenses of secretary for two years	32 73
Auditing books	4 00
Balance in bank	\$305 93
	777 53
	\$1083 46

Examined and found correct
Byron H. Jones, Auditor.
April 25, 1905.

\$1083 46

N.B. Fund for purchase of Journal, one share of stock, value \$50.00. Cash in bank, \$15.00.

On motion of Miss Rhodes, seconded by Miss Samuel, the treasurer's report was accepted.

PRESIDENT.—We will next call for the report of the Nominating Committee, Miss Milne, chairman.

"MADAME PRESIDENT: The Nominating Committee held a meeting at the Presbyterian Hospital, Philadelphia, on March 11, present Miss Bowen, Boston; Miss Radden and Miss Milne, Philadelphia. Mrs. Higbee, Chicago, and Miss Cahanian, Richmond, Va., wrote regretting their inability to be present. The committee regrets to report that Miss Riddle would not allow her name to be placed on the ballot as president. It also regrets that Miss Thornton and Miss Easley, having been notified of the committee's plan to renominate them for the offices of secretary and treasurer, have both declined these nominations. The following names are presented:

For president, Miss Annie Damer, Bellevue Training-School Alumnae, New York; Miss Lucy Fisher, New Haven Training-School Alumnae. For first vice-president, Miss Georgia M. Nevins, Johns Hopkins Training-School Alumnae; Miss E. H. Webb, Old Dominion Training-School Alumnae, Richmond, Va. For second vice-president, Miss Jane A. Delano, Bellevue Training-School Alumnae; Miss Katharine DeWitt, Illinois Training-School Alumnae. For secretary, Miss Nellie M. Casey, University Training-School Alumnae, Philadelphia; Miss Annie Rhodes, Bellevue Training-School Alumnae. For treasurer, Miss Anna Davids, Long Island College Training-School Alumnae; Miss Alice M. Garrett, Pennsylvania Training-School Alumnae. For two directors for three years—Miss E. D. Ayres, Rhode Island Training-School Alumnae; Miss Harriet Fulmer, St. Luke's Training-School Alumnae, Chicago; Miss M. M. Riddle, Boston City Training-School Alumnae; Miss C. D. Seidensticker, Hahnemann Training-School Alumnae, Chicago.

" Respectfully submitted,

" CAROLINE I. MILNE,

" Chairman."

On motion of Miss Davis, seconded by Mrs. Fleetwood, the report of the Nominating Committee was accepted.

PRESIDENT.—The constitution provides that a printed list of the nominees shall be given each delegate at the morning's session on the second day of this meeting. These printed lists are now ready and you may have them by calling for them. The Board of Directors have appointed a judge and two tellers to conduct this election. The judge of election is Miss Milne, of the Presbyterian Hospital, Philadelphia; Miss Ross, of the Johns Hopkins, and Miss Sly, of the Farrand, Detroit, are the tellers. [Miss Sly was unable to serve, and Miss Randolph, of the Virginia Hospital, was appointed a teller.]

We will now proceed with the business in hand and call for a report from the Committee of Arrangements, Miss Nevins, chairman.

MISS NEVINS.—I shall take only one moment to give you an exceedingly informal report. The Committee of Arrangements has to report that a chairman was appointed by the Executive Committee with permission to select four others in Washington to prepare for your coming, and we have had, of course, numerous meetings, have gone through the process with which all of you are probably familiar, the selecting of a hall, the selecting of certain speakers, the question of entertainment, and all these things which I need not go into. You understand that when you came to Washington that we had so much for you in the way of sights in the city that we were especially requested not to provide very much in the way of other entertainment; we purposely arranged the sessions for the morning and the evening, remembering that most all of the important buildings are closed at four and four-thirty, and therefore we gave you the afternoon for

that purpose. One word of apology, if we need it in any direction, is that all we had to go by in preparing for you was what other cities had done, and I think you have only to look about you to see that there has been no such attendance in any other place, so do not blame us if we have run short on programmes, badges, etc. I only want to tell you that we are delighted to have you here, that we are enchanted at this attendance, and that with such a reward the work must be considered absolutely nothing.

PRESIDENT.—I want to again call your attention to the constitution, which provides for the election of officers and says that the polls shall be open until the afternoon session, which should properly begin at two o'clock; therefore the polls will close at two o'clock, as it is not fair for us to keep these two tellers and one judge holding the polls open all afternoon for delinquent delegates to take their time in voting. We will now call for the report of the Committee on Printing.

MISS THORNTON.—Madame President, in behalf of Miss Damer, Miss Healy, and myself (members of the Printing Committee) I beg to announce that our work has been the printing of the constitution and by-laws at a cost of seventeen dollars for a thousand copies; that is the extent of our work for the year; the bills for the printing of the programmes and things pertaining to the convention, of course, have not come in as yet.

PRESIDENT.—Last year in conducting our programme we found it most interesting to delegate certain parts of it to the charge of those who were best acquainted with the particular subject in hand, and we found, also, that we reaped great results in the way of knowledge gained thereby, therefore the conclusion was reached by your Programme Committee that it would be wise to do so this year. We have delegated the papers on the programme to-day to the care and guidance of one, the very one best fitted to undertake any work along that line. I have very great pleasure, therefore, in introducing to you Miss Wald, of the Nurses' Settlement, New York, who will take the chair and conduct the programme for the remainder of the morning.

MISS WALD.—I thank you and the committee for this compliment, not as to me personally, I assure you, though that is very gratifying, but as evidence of the recognition of the important part that nurses must play in the whole social construction, or reconstruction. Your president has said that we have a glorious past, and so we have,—the glorious past of growth and the interesting period of development,—but we do not come into our heritage; we have no right to claim a distinct and individual place in the formation of ideals and in the establishment of standards for the whole community unless we take our place as constituent parts of the whole social structure, aside from our own professional interests. The nurse should not be only a nurse, and though we have all been told in the elementary stages of our work that our influence should not be limited to the four walls of the sick-room, nevertheless we did not hear as much of its extension as we do to-day. If we feel that hitherto there has been some lack of social purpose, some indifference to the whole community in the nurse's training, our history in this respect has not been different from the history of educational institutions throughout the world. Now the development and establishment of educational standards is claiming the best thought of many, and in colleges and universities as well as training-schools these responsible for development are saying, "We dare not stop here."

The community demands of us something more than nursing, and that which

nurses are fitted to give is especially important to those parts of the community that are lacking in resources. You are needed as educators of the families and the people with whom you come into contact, and as helpers by the army of social workers, who often look to the nurse for clear and definite directions, as having opportunities of knowledge that no one else has.

If it does not seem presumptuous of me to suggest it, I would say to the training-schools that, along with the technical training theirs is the obligation of teaching the pupil, "You also are a part of this great Commonwealth, to assist in preserving the principles laid down by the founders of the Republic, and when your duty takes you into the homes of the poor you must not only give your services with a feeling heart, but must employ your intellect as well, to see where abuses may be corrected and the cause of evil be abolished."

In this connection, as we are meeting here in the capital, it is interesting to recall that the President in his message has asked Congress to inquire into and take action on the sanitary conditions and housing problem of the District of Columbia, and I feel it would be proper for this meeting to pass some resolution approving his practical and much needed suggestion, if not out of order to take such action now. We will then proceed with the programme, and I promise you to remember that a very successful presiding officer has said that the ideal chairman is the one who does not steal all the material of the speakers. I will try to imitate the model chairman as he described him, who, at a certain performance, rose and said: "Gentlemen, Herr Schmitt is the best 'cello player in the world; I have introduced him and he will play."

MISS NUTTING.—I move in response to Miss Wald's suggestion concerning President Roosevelt's message that the president of the Associated Alumnae be authorized to appoint a committee to take the proper steps in reference to the suggestion.

Motion seconded by Miss Palmer and carried.

MISS WALD.—The first paper to-day is the paper on "Visiting Nurses and the Prevention of Tuberculosis," by Miss Thelin. I will remember my promise not to say very much, although I should like to. Miss Thelin is a member of the General Council of the Maryland State Board Committee on Tuberculosis. She and Miss Nutting represent the nursing profession, having been complimented by election to that office. Miss Thelin will give you a general outline of the work that has been done on tuberculosis. To fix your attention in a slight manner upon the tremendous effect of education along those lines I should like to quote one figure—that in the last fifteen years in New York City, during which time there has been a great deal of money and time and effort devoted to the education on the prevention of tuberculosis, the mortality has been reduced forty per cent. I take pleasure in introducing Miss Thelin, a graduate of the Johns Hopkins Training-School.

VISITING NURSES AND THE PREVENTION OF TUBERCULOSIS

BY MISS REIRA THELIN

"The open-air treatment for pulmonary consumption, or phthisis, is by no means so new as we moderns imagine. Dr. Oeler, in an address made in 1900, quotes from John Locke, the philosopher, telling of a case

of incipient phthisis in which, as he says, 'The morbid matter was violently translated into his (the patient's) lungs.' The physician ordered him to ride horseback '6 or 7 miles the first day, and to increase daily his journey, as he should be able, until he had rid 150 miles.' The patient improved wonderfully under this treatment. But this physician of two hundred years ago had recourse to such a cure 'when all things else had failed him,' and it is only recently that the belief has become general that fresh air is *the* cure, first and foremost.

"That the idea has not yet permeated the masses the innumerable quack 'cures' that are still so sadly prevalent bear abundant testimony. To make this belief general, to let in light in the dark places, figuratively and literally, is the object of the present world-wide movement for the relief and control of tuberculosis.

"The discovery of the tubercle bacillus by Koch about twenty years ago (1882) having demonstrated the fact that consumption is 'communicable' was logically followed by the conclusion, therefore 'preventable' with proper precautions, but it was some time before the cautious would admit the third statement, 'Consumption is curable.' However, the mass of evidence now accumulating gives us hope for the future.

"Dr. Knopf, in the *Medical Record* for July, 1904, gives a brief history of tuberculosis dispensaries, which I quote here:

"The French were the first to inaugurate their Dispensaire Anti Tuberculeux, in Lille, Professor Calmette being its founder, about 1888. Next came the Germans with their 'Poly klinik fur Lungenkranke.'

"Throughout Europe and in some of the South American Republics there exist now numerous tuberculosis dispensaries devoted exclusively to the treatment of consumption. After speaking of a dispensary in Cuba inaugurated by the sanitary officers of the United States Army, Dr. Knopf goes on to say: 'The first dispensary class in the United States devoted exclusively to the treatment of tuberculosis was inaugurated some nine years ago by Dr. Ed. J. Birmingham, of New York, at the New York Throat and Nose Hospital.' Dr. Knopf then tells of the beginning of the clinic for pulmonary diseases of the Health Department, of which he is an associate director.

"New York, starting out in advance of other cities in this work, has so far kept that position. Pennsylvania can claim the honor of the first 'Society for the Prevention of Tuberculosis' in 1892, but the active warfare waged by the Health Board in New York is surpassed (Medical Officer and Director of Bacteriological Department) or even equalled in no other city. Dr. Biggs, Medical Officer, etc., one of the most active of the Health Commissioners, says that in the first year after the passage of their laws requiring the report of every tubercular case, forty-five cases

were reported. In the second year seven thousand cases, and in 1904 nineteen thousand cases, of which he thinks there were four or five thousand duplicates. He claims, however, that now ninety per cent. of tubercular cases in New York are reported. Does this mean that he is gathering statistics regarding the disease? It means that in every case the patient has been traced out, instructed, removed, or cared for in such a way as to make him more comfortable and render him less dangerous to himself and the community.

"New York, as I said, takes the lead; but other cities are not far behind, and new societies are being formed and new clinics opened every month. It is interesting to note that the matter has become not only a subject for doctors and dispensaries, but a social, a municipal, a national affair. In this month the National Association, which, like the municipal societies for prevention and control, is composed more largely of laymen than of the profession, is to meet here in Washington.

"It is easy to understand this when one considers the economic loss from a disease which attacks men and women at the age when they should be of most value to the community, renders them burdens for so many years, and at the same time a menace to the health of those around them unless properly cared for. In all this stir, what is the nurse doing?

"Information regarding dispensaries and societies is comparatively easy to obtain, but when one begins to inquire as to the visiting nurse in this work, one finds scanty records.

"Miss Brandt, statistician of the New York Society for Relief and Control, wrote, 'The recognition that nurses are a most valuable part of the work of prevention is so recent, comparatively, that I imagine very little has been written about it.' Yet I venture to say that before societies were formed or clinics opened, wherever a district nursing organization existed, *there was* a centre for 'prevention and control,' working quietly and faithfully, with no thought of public recognition. Without a doubt, nurses had already done much to reduce the spread of the dreaded disease in large cities by their lessons of fresh air and cleanliness, taught in every household where they gained an entrance. Twelve years ago, before cases were first registered in New York by the Board of Health, Miss Wald and Miss Brewster at the settlement in Henry Street daily obtained the names of patients who applied to the Chronic Hospital and voluntarily went to the patients' houses to instruct them.

"The district nurses in Baltimore had been supplying sputum-cups and giving instructions long before the special work was undertaken there, and so in all cities.

"Within the past eighteen months recognition has come, and we

find organized bodies of public-spirited citizens appointing nurses on their Councils, doctors asking for the results of their observations, and all alike turning to the one who has an entrance to the home, who is welcomed as a savior, and listened to as an oracle.

"Nurses are now asked to bring all their trained powers of observation to bear upon this one subject—think out cause and effect in environment, antecedents, habits, associates—and give humanity the benefit.

"It is easy to see that the nurse, if she will but accept the call, is the most valuable helper in the battle; first, because she already has the confidence of the patients; secondly, because her training has taught her to observe; thirdly, because she not only abominates the speck of dust, but *knows why* she abominates it.

"The importance of this question has led to a specializing of the work of the district nurse, so that she may give all her time and thought to this most to be dreaded scourge. Many cities—New York, Boston, Chicago, Baltimore, Minneapolis, Cleveland, Saginaw—have nurses who devote their entire time to this, and others are coming forward.

"In New York the doctors of the Health Department prefer to have their nurses inspect and record, but do no actual nursing, so that those specially employed by the clinics are in reality '*nurse inspectors*.' The doctors have recognized their value, and are quick to seize upon its advantages to them. In Manhattan there were last year fourteen nurse inspectors employed by the Board of Health, the Vanderbilt's, Bellevue's, and Gouverneur's clinics, besides those of special clinics at the Presbyterian and New York Hospitals, who also do nursing as well as inspection.

"Let us consider the duties of the nurse inspector. Each has a district and visits her new cases as soon as possible after they are reported, within three days at most. She has a long list of questions to ask, and many things to observe as to general sanitary conditions, occupation, habits, stage of disease, and finally must decide whether or not the patient is to be kept under observation. If possible, she tries to induce him to go to a sanitarium or hospital, for New York has now five hospitals which will receive such patients,—Bellevue, St. Joseph's, Seton, Riverside, Lincoln, St. Luke's,—besides its sanitarium at Raybrook, also Bedford, for incipient cases, and the Montefiore Home for Incurables. If he will not be persuaded, and is an ambulatory case, and is not being visited by any other nurse, she repeats her visit two or three times a month to see that her instructions are being carried out. The patients are very grateful, do not object to giving information, as a rule, and very pleasant relations are maintained. She is able to obtain milk for him through the Diet Kitchen, which receives some remuneration from the city for its coöperation. She advises as to diet, as to the

best methods of carrying out the fresh-air treatment, and continues her visits so long as the patient continues to be an ambulatory case.

"Should he become bed-ridden, or when he requires the services of a nurse, he is referred to the district nurse in the settlement or some other nursing association. These nurses visit him once or twice a week, or every day if necessary. They not only advise the bath, but give it themselves; they show the family how to give the cooling alcohol sponge, to prepare the monotonous diet, milk and eggs, in various ways to tempt the appetite, while watching that the same care is observed in disinfection, isolation, and fresh air. In performing these services there are unsurpassed opportunities for observation of the true state of affairs, and many valuable points are elicited without the formal list of questions. In the case of a tuberculosis nurse doing both inspection and nursing the majority of her patients will be ambulatory cases, but even for them the preparation of an egg-nog or albumen, a demulcent drink, the alcohol sponge, and when there is an afternoon rise of temperature—in many little ways one may render service.

"The offices of inspection and nurse are combined in most cities, especially in those where the movement originated with the nurses themselves, and where the doctors have appealed to visiting nurse organizations which already existed. I think I am right in saying that Boston belongs to the latter class, while in Chicago, Minneapolis, and Cleveland the visiting nurses were the originators of the movement. In Baltimore the first special nurse was employed by the Johns Hopkins Clinic at the instigation of the superintendent of the Training-School, and the second nurse was obtained through the efforts of Mrs. Osler for the Visiting Nurse Association.

"As I have said, the specializing of the work of nurses has taken place within the past year and a half at most.

"At the Tuberculosis Exposition held in Baltimore in January, 1904, several visiting nursing organizations sent accounts of the work they were doing in a general way, but I think Miss Damer in New York, Miss Jammé in Minneapolis, and myself in Baltimore were at that time the only special nurses for tuberculosis. Those of us who read *Charities* can keep abreast of the tide, as that magazine publishes an account of each new undertaking, and our *NURSING JOURNAL*, of course, keeps us informed of nurses who take up such work.

"There is a call for nurses all over the land, from private cases who look to gain health again by the forced feeding and fresh-air treatment, from new sanatoria, and for visiting nurses especially, for, as Dr. Osler has said, ninety per cent. of these cases must be treated in their homes. A nurse who undertakes this work in the right spirit will find

that it calls upon every resource which she possesses. She may think it an easy task to visit people and tell them about cleanliness and fresh air and disinfection, but when she finds how different is each case,—though all bearing the same dread mark,—how it brings her in touch with broad social questions, how much courage and faith and real knowledge she needs in order to impart it to others, she will feel that no amount of preparation can be too much.

“Especially should I recommend three months at least of general visiting nursing, so that she may enter the patients’ homes prepared to use what she finds there to the best advantage.

“Many nurses are deterred from entering this field by their fear of contracting the disease themselves.

“Dr. Knopf’s advice to medical men who are *predisposed* to tuberculosis is that they should not undertake it unless ‘they can live in a health resort, can take life relatively easy, and be able to take just as much care of themselves as they would of the patient they are most interested in.’ The same would apply to nurses, of course, but to the average nurse in good condition there is no more danger than in any other infectious disease. She knows the rules for prevention—all she need do is obey them herself as carefully as she expects her patients to do. For it is the preventive work in this field that really counts.

“I remember the encouraging words of a well-known doctor at the Johns Hopkins. I was feeling down-hearted at the deaths of my most faithful patients, at the falling from grace of those whom I had deemed most faithful, and was ready to think all effort futile. He said, ‘You don’t see it now, but what you are doing is of far more importance than what I am doing. I am trying to patch up a few cases for the present—you are working for future generations.’

“Dr. Biggs says that preventive work in New York has already decreased the mortality forty per cent. in fifteen years. At that rate in fifty years we shall have no more deaths from consumption.

“In closing I cannot do better than quote these words, which I found in a little magazine called *Co-operation*:

“‘To ward off the calamity of disease and to prevent the spread of a pestilence, is to increase the sum of human happiness and to elevate the race.’”

MISS WALD.—I must apologize to Miss Thelin for having given the figure of forty per cent.; I was afraid it had escaped her. The question is now open for discussion, and it is hoped that the nurses who have had experience in the various communities will give us the value of their experience by telling of the features that have been developed. Each place has perhaps had some special features that have been tried and found effective,—the circumstances of housing and the general conditions,—they all make very interesting reading.

MISS DAMER.—Down in old Bellevue in New York we have been experimenting in a great many ways for a number of years and undertaking a great deal of work for the care of the sick. In our out-patient department the doctor in charge agreed to have a little extension of that out-patient work which they had not done before and to provide a special clinic for tuberculosis. The patients before that had been going into the general medical clinics, but we established a special one, and in addition to having the clinic we were to have a nurse or nurses, according to the needs, who would visit the patients in their homes. Now Bellevue is our large charity hospital, and we have our patients coming from among the very poor; we are pretty well equipped, but we have not the fine buildings nor the enormous rooms that are provided in some clinics, and it does not attract the better class of patients, so that our work lies entirely among the poor. We have the people of the artisan and mechanic class who have had to give up their work and who have sunk to small paying positions if they work at all, and we have patients who have worked as long as they have really been able; we get very few patients in the early stages of tuberculosis; occasionally a young man or young woman comes to us, but the most of them are in the advanced stages, men who have been working on until they could not work any longer. The nurse is, as Miss Thelin says, more of an inspector than a nurse, as we only visit the patients who are able to come to the dispensary regularly, and we go, as she says, into the homes and make an inspection and a report of the social condition of the family, the sanitary condition of the home, and to over with them the treatment to be followed, and they do everything that they can do themselves to cooperate with the physicians and the nurse in securing a cure if possible. In New York City we have very much to contend with on account of the construction of the buildings there, and as our poor people, of course, live in those high, close tenements, where many of the rooms are really without any ventilation, you might say, and most of our patients live in little, three-roomed apartments. There is one light room, one that is half light, and one that is entirely dark; the entrance is usually in the middle room, which sometimes has a window opening on an air-shaft, and it is very pathetic to hear them say, "Yes, this is an airy room." And really all the ventilation they have is that one window opening into the common hall of a tenement house, which is always at least six stories high, and the district nurses always say that the patients are found on the top floor. We found, however, that that is good for our tuberculosis patients; we would rather have them up there, as they have more opportunity for light and air.

The legislation of recent years which has resulted in the splendid law we have now with regard to the construction of the new tenements, which must have every window opening on a court of a certain size and every room well ventilated, does not help our tuberculosis patients very much because the rents in these houses are so high and they are not able to pay them. They are, therefore, being driven into the less desirable tenements. We try to remedy that, of course, when the relief societies are willing to help us, and they do help us a great deal, although the funds at our disposal as yet are very insufficient, and they are not able to do all they desire to do in moving our patients to better rooms. It is a very small percentage of them that you can get to go away, and naturally we have to treat them in their homes. It is almost impossible in the winter time to get the patients into a hospital. The new sanitarium at Raybrooke has accommodations for over one hundred patients, but they must be in the very incipient

stages. The latest orders received were that the patients' teeth must be in perfect condition. Our people are not, as a rule, very attentive to the dentist, and all we can do is to send them to the dental infirmary, where they often have to wait for about three months before they can go to a sanitarium, so that their disease is progressing all the time. It is only two months ago that we got our first patient admitted to the State Sanitarium. There has also been a law passed last year prohibiting the erection of hospitals and sanatoria in the Adirondacks unless with the consent of the property holders, and this also has militated against the increase of opportunities of placing our patients where they could be helped. The hospitals are limited in New York City; many of them will not receive tuberculous patients—the majority of them, in fact. To the infirmary on the Island we can send about four hundred. That building is crowded in the winter with men who drift to the city who in the summer take care of themselves; in the winter they drift back and are usually sent to the infirmary. They are so crowded there that in the middle of the winter they are sleeping on the floors and on blankets, and naturally our patients in their homes, if they have any kind of a bed at all, do not care to go to the infirmary.

With regard to the window. It is a problem how we are going to give a patient air. The doctors always say that patients must have a room to themselves, with a window opening to the outer air, one window at least, and when you go into a house where there is a family of ten, perhaps, living in one room, they think themselves that it is hard on the rest of the family to give up that one room, but they are always willing to do what they can for their afflicted one, and it is wonderful what they do sacrifice for the sake of the father or the brother or the mother. And the poor mothers do have the hardest times when they are the ones that are sick. They will not go away, and they cannot leave their families. Sometimes we will get people to help these sick women with their washing, so that the mother will not have to do it. In spite of all, the women when they are sick get along better than the men do; they are willing to follow out instructions longer, perhaps; they are perhaps in better physical condition when they come to us, and we have very many hopeful cases among them. We have persuaded some of them to sleep on their fire-escapes; we have fixed up steamer chairs and blankets and cots, and some of our patients sleep out there until November, and they begin again in March to sleep out on the fire-escape; we have other patients sleeping in hammocks on the roof; in the very middle of summer they object to that on account of the strong sun and on account of the wind. The question always is the lack of money among our patients—they have nothing themselves; but we have been able to get some of these patients hammocks strung up and covered with an awning. They are too tired and too far away even from the parks, and rather than go out they just stay at home. They get discouraged, and it needs all the nurses' efforts and inspirations to keep them doing what they ought to do; then, of course, we have the trips for them in the summer, sending them to the parks. The hospital itself, in addition to furnishing the medicine, also furnishes the milk and eggs, after the nurse reports as to the home conditions of the family. Most of them are not able to provide this extra nourishment; the breadwinner of the family is generally the patient and the nourishment must be provided. As Dr. Miller, our chief, says: "What is the use of telling people they must have so and so when they cannot provide it for themselves?" One doctor tells us of a man who came to his clinic and said he had no appetite. Then he gave him medicine for his

appetite, and later on he came again and the doctor said, "How is your appetite?" The man said, "It is very good." The doctor wondered why the man was not gaining, and he explained that he had a good appetite but he had not anything to eat. So we have felt that if no one else provided the milk and eggs the hospital had to do it. The diet-kitchens furnish the milk and the hospital pays for it, and the eggs are given to them once a week when they come to the dispensary. They do not all get it, and we do not wish one to say that someone is getting something that the other one is not. We also try to have them sent to the sanatorium if possible. We have a fine sanatorium at Stonywald and some of our friends have paid for patients for us there for six months at a time. We had a tennis club which last summer had a balance of forty dollars in its treasury, and it gave it to us to use for sending our patients up there to Stonywald. We have now seven women and girls up there and all are doing well; all write to me regularly every week and one little girl sends me pictures. So, you see, the nurse has more to do besides merely inspection; practically, that is our work, because we have no real nursing to do, but, as Miss Thelin has said, the nurse doing that work has a great deal more to do than visiting the home; her work extends out into all the interests of the family, to comfort the patients and do all that she can to promote their health.

MISS WALD.—I think Miss Damer's very interesting account has been impressive in illustrating how much depends upon the thoroughness of the individual to whom the work is entrusted.

MISS KRATINA.—I would like to ask if the nurses in New York who desire their tuberculous patients to frequent the parks where children play require these patients to use the sputum-cups.

MISS DAMER.—Yes, we provided that cup for use in their homes; now we are using the Japanese paper napkin; the patients prefer those; we used the pouches first, but a great many objected to using those in public. As one patient says, a man may expectorate on the floor of a car, but if he draws out one of those pouches and uses it in his efforts to be cleanly, the people would draw away from him. This pouch fits into the pocket. But we are now using the paper napkin and they can use that as they would a handkerchief.

MISS CHESLEY.—I just wanted to say a few words about our work in Ottawa. We have established a society there for the prevention of tuberculosis very lately with no definite form of action. However, it is now doing what you have already done here, and that is it is employing an instructed visiting nurse. She is to be affiliated with the doctors and a Medical Board, also the Board of Health, and in conjunction with a society of which you already know, the Victorian Order of Nurses. Her headquarters are to be there and she is to use their telephone. She is appointed under a salary of seven hundred and fifty dollars for the first year; this we consider rather good, and everyone has come forward and made our movement comparatively easy.

MISS PHILAN, of Rochester.—The work in Rochester began last May, when the municipal authorities gave the Rochester Public Health Association the use of the Municipal Hospital for the treatment of incipient cases of tuberculosis. It is situated just outside the city and is well planned for the outdoor treatment of the disease. Here there have been treated on an average of fifteen cases, nearly all of whom have shown a marked improvement. The advanced cases are treated in their homes. One visiting nurse is employed. She oversees the cleaning and disinfecting of houses from which tuberculosis cases have moved

or in which they have died; provides sputum-cups, paper napkins, and milk and eggs when necessary. She instructs the patient how to care for himself and protect others by caring for his sputum. In several cases a shack has been erected or porch enclosed with canvas, and a bed and bedding furnished, thus providing a room for the patient away from his family and giving him the benefit of the outdoor treatment. Early in the spring the municipal administration gave an appropriation to help support the work at the Municipal Hospital. I think the work of the visiting nurse the most important in the prevention of this dreaded disease.

Mrs. GERRIN.—Detroit has the reputation of being conservative, but if it does move slowly, it moves surely. We have in Detroit a very successful Visiting Nurses' Association about six years old, and included among the number of visits made last year—there were over seven thousand visits made—there were a great many tuberculous patients. There has not yet been a regular inspector appointed for reporting cases, but the nurses take up the nursing of these cases in connection with their other patients, and it is due largely to the enthusiasm and the interest of these nurses themselves that the successful results have been attained. The same preventive measures are used there that are in use in other cities; patients are instructed how to make use of the appliances and in a general way a great deal of instruction is given. Last month Professor Knopf visited Detroit, and following his visit there was the organization of a society for the study and prevention of tuberculous. One feature that was especially gratifying to us was that the nurses' profession is represented on the board of that society, and by the time we meet again we hope to have some very definite reports made along that line, but we want you at least to know that we are co-operating with other cities in the warfare against tuberculous.

Miss McMILLAN.—Chicago has been working very hard this last year fighting against tuberculous. The Visiting Nurses' Association of Chicago has done such beautiful work with the Anti-Tuberculous Committee that all of Chicago is proud of that association, and, Madam Chairman, if I may, I would suggest that Miss Fulmer, who represents that association, should speak to us this afternoon.

Miss FULMER.—The Chicago Visiting Nurse Association three years ago appropriated two thousand dollars for the operations of a special sub-committee for the care of tuberculous poor in their homes. The main work of the nurses is among the hopeless cases. Of five hundred people cared for in 1904 four hundred and eighty were bedridden. This condition exists because of the inadequate sanitarium and hospital services in Chicago for this especial disease. The care of the incipient cases is no doubt of more satisfaction to the nurse, but as teachers and investigators I am afraid we forget that we are sent to these poor unfortunates to give skilled nursing care which no other body of philanthropic workers can give. We ought not to lose sight of the fact that in our effort to better the condition in the homes of the tuberculous poor no scientific investigation can take the place of the real nursing service. The nursing profession at large should be very proud of the special work in this line that has been done by Miss Thelin and Miss Damer.

Miss WALD.—During the previous speakers' remarks it occurred to me to remark that to communities where there has been no crystallized expression of the concern for education on the prevention of tuberculous, I am sure that the National Tuberculous Committee, which has its headquarters in New York,

would be very glad to send literature, information, and give assistance to the nurses in any community where such an organization has not been effected. They will particularly honor any request that will come from the nurses. With one more speaker, Miss McKechnie, I think that perhaps the discussion on this particular paper must cease for this morning, that we may not take too much time from the next.

MISS McKECHNIE.—Will the chairman please stop me if I go beyond the limit of time?

You have heard of the work against tuberculosis carried on by the Board of Health in New York City, and I should like to say something especially about the nurses engaged in this work.

The city is divided into eight districts and a nurse is assigned to each. The work of the nurse inspector is inspecting entirely; we do not call ourselves nurses from a nursing point of view at all, as we do no actual nursing of the sick. To give you an idea of the work done and the information gathered, I have in my hand several cards which are filled by the nurse at the time a visit is made. It is not a certain limited number of cases that are reported and visited, but every dispensary, hospital, and charitable organization in the city is required to report to the Board of Health every case of tuberculosis coming under its observation. Private physicians are requested to report their private patients, and if requested a nurse will visit them also, otherwise the physician takes the responsibility of giving directions regarding care of sputa, etc.

The reporting of a case means that a diagnosis of tuberculosis has been made by a physician either in his private practice or in a dispensary or hospital. These reports then form the basis for the work of the visiting nurse or inspector. A blue card is given to her with the name and address, age, sex, and nationality, of the patient that she is to visit. When the patient is found this fact is stated on the card, and a pink card (observation card) is also made out at the time of the visit. If the patient is to be kept under observation, a nurse's observation card (white card) is filled in and kept by her, the other two (one pink and one blue card) being returned to the department. These three cards cover the first inspection.

The information recorded on the observation card is as follows: Name, street, number, floor, age, nationality, sex, married or single, occupation, date. Character of house—tenement, lodging-house, hotel, furnished room. Condition of house—whether in good or bad repair; number of families; owner or agent and his address, so that he may be notified if the sanitary conditions are not what they ought to be; number of rooms occupied by the family, which may be from one to five, five being the largest number occupied by one family in a tenement house; the total air space, roughly estimated; ventilation; light—the number of rooms having window opening into the outside air, how many are dark, with windows opening into a shaft, the hall, or into another room. Condition of the plumbing, whether in good or bad repair, open and modern, or closed in. This includes observations of the sink, washtubs, bathtubs, if any, and water-closet; the kind of closet and where situated; if in the yard, whether a school sink or yard hopper; if in the house, whether in the cellar, the hall, or the apartment. Another important question is whether any work or manufacturing is done in the rooms; also how long the patient has lived on the premises; number of persons in the family—adults, children, and boarders; and, lastly, the circumstances of the family, whether the patient has a separate bed, a separate room, and proper food.

Information as to the condition of the patient comes next, how long ill, amount of fever, expectoration and how disposed of, and present condition and stage of disease.

From this information and from his apparent condition the nurse advises the patient or makes recommendations to the department for his care; if not under treatment by a physician, he is referred to a dispensary. If hospital care seems advisable and the patient is willing to go, he is recommended for admission to a hospital.

If charitable aid is necessary, the patient is referred to one of the three charitable organizations of the city. If the patient is in bed and in need of nursing care, he is referred to the Nurses' Settlement or other district nursing association. If a sanitary inspection is necessary or disinfection required, a recommendation to this effect is made to the department.

If the patient is able to be about and going to a dispensary for treatment and no other nurse visiting him, the Board of Health nurse continues to visit him once or twice a month to advise and assist him in carrying out the directions of the physician in regard to fresh air, food, cleanliness, care of sputum, exercise, etc.

What I wish to call attention to most particularly is the need for preparation before undertaking such work as this—preparation along social and philanthropic lines. Miss Damer has spoken of experience as a necessary qualification—I would also add that no woman should go into it without having a real and sincere interest in people, especially in poor people, and in the conditions under which they live.

It seemed to me while in hospital work that much of the sickness that crowded the wards of hospitals could be prevented if only the home conditions could be made better, if people, and especially children, could have proper nourishment. I now feel that there is "health nursing" to be done as well as "sick nursing," that this work lies in the homes of the people and covers all that can be done to improve housing conditions—in the way of educating poor people up to a standard of cleanliness and the benefit and blessing of fresh air, in providing suitable and sufficient nourishment, and in every way possible striving to make healthier bodies capable of resisting disease, as well as in preventing the spread of disease by controlling the infectious material or person.

If the trend of civilization is, as it seems to be, towards the city and industrial pursuits, and away from the country and agricultural pursuits, then the problem of hygienic living in cities will increase, and along with it the need for "health nursing." Not a few nurses are already engaged as tenement inspectors, sanitary inspectors, school nurses, all of which have for their object the establishment of healthful conditions and the prevention and limitation of disease.

Miss WALD.—As you will see, the discussion of tuberculosis bears such a close and intimate relationship to the subject of the next paper,—that of the developments in the visiting nursing,—that we will give a little more time for this discussion, since we would like to hear from Miss Johnson, of Cleveland, and Miss Carr.

Miss JOHNSON.—In July, 1904, the Visiting Nurse Association felt the necessity of giving the tubercular poor special and detailed care. One nurse from the association was appointed for this work. The various free dispensaries of the city were visited and names and addresses of patients having tuberculosis

were asked. With one exception this request was met with interest and co-operation. Other sources, such as the public schools, free kindergartens, settlements, etc., were approached, all being able and glad to further the work.

During the first month fifty tubercular patients were visited and their homes also. The work has had a steady growth. In October a Tuberculosis Dispensary was opened in the Western Reserve University Medical College. With this the Visiting Nurse Association is in closest touch. The dispensary is opened daily from two to three, one nurse always in attendance. The work of the association is in complete co-operation with the City Tuberculosis Sanatorium, every case sent there being reported to the association, and the home of the patient is then visited by the tuberculosis nurse.

The Associated Charities in every case where there is need supplies the home patient with milk, eggs, often bedding and other material relief. Every dispensary and home patient visited by the nurse is reported to the Board of Health with a full statement of sanitary conditions. The work done by the Visiting Nurse Association has brought about the formation of an Anti-Tuberculosis League. This league combines the various activities of the city, such as the Associated Charities, free dispensaries, district physicians, public schools, libraries, day nurseries, free kindergartens, labor unions, factory inspectors, Home Gardening Association, Milk Fund, fresh-air camps, outing homes for children, and the Associated Press. There are now two nurses of the Visiting Nurse Association detailed for the tuberculosis work. A third is needed, which we hope will soon be supplied, as we have now under our care over two hundred patients.

MISS WOOD.—In St. Paul we have a very small sum; we have the use of the diet kitchen in the hospital, and the King's Daughters and some other small societies have this summer donated one dollar, and some twenty-five cents, and some five dollars per month, which makes up a little sum in order to get the necessary milk and eggs.

MISS WALD.—The United Hebrew Charities furnish the milk and eggs in New York City. Miss Damer described the relief given to the city patients. It is my experience that where it is possible to have the responsibility fixed upon the municipality one is not so dependent upon the way and means by which funds are furnished; if appropriations can be secured from the authorities of the city, there is an element of permanency about it.

MRS. VON WAGNER.—May I just suggest that in the smaller cities the nurse, especially the district nurse, ought to appeal to the public and make her wants known, so that from the charitably inclined individuals we can get relief? The public at large waits for the information, and when it is given and made known it is not so difficult.

MRS. ROSS.—Before leaving this subject I would like to offer a resolution, if it is in order, and that is:

"WHEREAS, The papers and reports given this morning are the first presented by the Associated Alumnae on the direct work of the nurse in the prevention of tuberculosis, that a synopsis of such papers be prepared and forwarded to the National Tuberculosis Committee in New York as a contribution from this association to be added to their other literature for distribution."

MISS WALD.—A resolution, I am sure, in which we all most heartily concur. Resolution seconded by Miss Nevins and carried.

MISS CARR.—I will only keep you a moment. We have heard from all

the large cities on the question of tuberculosis, and although Miss McKeehan's remark that the populace is leaning towards the cities is quite true, we are not entirely as yet an urban population, and tuberculosis is not confined to the large cities. I happen to know of one city in which you would imagine it hardly existed, and that is Newport, R. I., which is popularly supposed to be inhabited only by the very rich and the very well, but tuberculosis is sufficiently extensive there to warrant the establishment of an association for the prevention of tuberculosis with quite a good deal of work to do among the poorer members of the population. I only want to suggest that the delegates here present who come from the smaller towns, often villages, should constitute themselves a missionary force to bring this subject before any people whom they can interest in the smaller towns and the villages of this country; there are plenty of women's clubs; there are the Boards of Health; there are the municipal authorities, all of whom I think could be interested if people would sufficiently know their subjects to be able to impress it upon them. I beg to suggest that those members present who do not come from the large cities, but who have opportunities as trained nurses in knowing whereof they speak, to impress the importance of this subject upon the members of women's clubs or any other societies in the places to which they belong who can help towards this movement.

MISS WALD.—In concluding this subject I think that we owe a special debt to Miss Carr, for there is a moral in it. We in the cities who feel the burdens, I think, are very likely to cast some of them back upon the country; if the country is not prepared to receive the city's burdens, then it is really worse off than the city from which the burdens come. We will now listen to Miss Lucy Fisher's paper on the "Developments in Visiting Nursing," which will be read by Miss Thornton.

DEVELOPMENTS IN VISITING NURSING

By MISS LUCY FISHER

Visiting Nurse, United Charities, San Francisco

"At the impressionable age when the wonders of the universe begin to awaken into activity a child's imagination, I was told that no two leaves on a tree corresponded to each other exactly. That God had the power to make each leaf differ from every other leaf seemed too wonderful to be true. Visiting nursing the world over is essentially the same, but a careful observer sees that it has differentiations, sometimes as slight and again as diverse as the leaves of the trees that we have matched in our childhood. The individuality of the woman who adopts visiting nursing as her profession will naturally be stamped upon her work, and the locality in which she carries it on, with the especial needs of its characteristic population, will always be a very positive element that will make her work distinctive.

"San Francisco, like Rome, is built upon seven hills, and from their summits is seen the beautiful bay and its happy isles, with the surrounding hillsides, and the ocean with the intermediary Golden Gate.

The ocean carries across its waters through the Golden Gate into our harbor a foreign population of such diverse nationalities that probably even New York cannot rival it. On and about Telegraph Hill, the point where the early settlers sighted the vessels coming through the Golden Gate, is our Italy. Hardly our 'Little Italy,' as there is an Italian population there of twenty-five thousand people, a large enough number to be incorporated into two fair-sized cities. The other nationalities in this Telegraph Hill district are the Spanish-speaking people, which are composed principally of the Spanish, the Mexicans, and the Porto Ricans. No one has yet been known to cast the aspersion of race suicide at Telegraph Hill's Latin population. Our famous Chinatown, so picturesque to the tourist and yet a feature that this same tourist is probably quite willing for us to possess, is another fair-sized city on a hill. On the southern side of our city, which is, with the exception of Rincon Hill, on the level, are mingled with the Americans the Russians, Poles, Germans, and the Irish races. The Japanese population, which is so rapidly increasing with every incoming China steamer that the labor interests are almost in a panic over it, is scattered all over the city, excepting the exclusive Latin Quarter.

"It is surprising, with such a large foreign population, formed of the class so peculiarly in need of instruction in the laws of health and sanitation, that visiting nursing was not begun in San Francisco before the spring of 1897. The Fruit and Flower Mission had for one of its members a nurse, Miss Eugenie Woods (later Mrs. Hubert), a graduate of the Children's Hospital. The custom of the mission is to carry weekly to the needy sick a basket of provisions with fruit and flowers. These weekly visits convinced Miss Woods that there was a great need for a nurse in San Francisco to carry on just such work as was being done so effectively in the large Eastern cities. At Miss Woods's suggestion visiting nursing was begun in San Francisco, and she was installed as the first visiting nurse. Within a short period a second nurse, Miss Octavine Briggs, was added to the work, and the responsibility of maintaining these nurses was transferred to the Associated Charities.

"Miss Briggs, who was a resident of the South Park Settlement, became convinced that Miss Wald's and Miss Brewster's plan of combining the settlement idea with district nursing was the most effective way of carrying on nursing work among the poor. With Miss Frances M. Doyle's cooperation a house was rented in December, 1898, on Tehama Street. This is in a thickly populated district south of Market Street, and in a neighborhood composed largely of the Irish and Jewish races. The house was remodelled at considerable expense to meet the

needs of the Nurses' Settlement work, and when completed it served its purpose fully. It was a model of simplicity and beauty, which would unconsciously have the effect of raising the standard of the homes in the neighborhood.

"Miss Briggs did not sever her connection with the Associated Charities until the spring of 1899. The responsibility of raising the money for her work then came entirely upon Miss Doyle and herself. The sum has had to be increased yearly to keep pace with the growth of the work. Last year over forty-five hundred dollars had to be collected to meet the current expenses. The original house was given up two years ago for a more commodious one on the same street.

"Shortly after Miss Briggs started her settlement an assistant nurse, Miss Eleanor Williams, was engaged. Miss Williams has been identified with the Nurses' Settlement for the past four years, and has proved herself to be an invaluable co-worker with Miss Briggs. A third nurse, Miss Louise Smith, has been connected with the settlement for some time and has proven herself efficient also as a district nurse.

"Two young working girls whose home had become intolerable to them because of the drunkenness of their parents came to their friend, Miss Briggs, and said they wanted a pretty home like hers. A place was rented in the neighborhood, and the girls immediately transformed it into the semblance of their model, with stained floors, green walls, a narrow shelf around the dining-room, and pretty china for its decoration. Miss Briggs rents part of the flat from the girls for the use of the settlement.

"A case of extreme cruelty to a child was brought to Miss Briggs's attention not long after the settlement was started. The little girl so brutally neglected appealed strongly to Miss Briggs's sympathies. She succeeded in having herself appointed guardian of the child and brought her to the settlement. The child has developed into a bright and attractive young girl, much as a flower would that had been removed from an adverse climate to a congenial one. The girl attends school and between times takes part in the settlement housework, which is done entirely by the family. Two other children have recently been adopted into the family. The boy member is a leader of a gang of unruly boys in the neighborhood. Miss Briggs felt that under her influence the boy's leadership might be directed, and that the captain of the gang would attract his followers to the settlement. These three children are important members of the household, as they are very essential factors in making the settlement a real home.

"The Home versus The Institution is Miss Briggs's watchword. As the Tehama Street work continues to grow, the family will not be

made larger, but a new home will be started in another neighborhood. This plan will accomplish two ends,—institutionalism will be avoided, which is bound to enter the larger settlement, and another neighborhood will be reached through the influence of a home that will have the same ideal as this one—cleanliness combined with beauty, and the governing spirit—neighborly helpfulness.

"While visiting nursing was being done by the Associated Charities and the Tehama Street Settlement, Miss Aimee de Turbeville was between her private cases voluntarily caring for the sick in the parish of the Cathedral Mission—a little Episcopal church near Rincon Hill and not far from the water front. The mission was founded by Mr. William Kip, a grandson of Bishop Kip. Clubs for men, women, and children were formed, and the foundation laid by Mr. Kip before his death of the mission's social activities.

"After a few months Miss de Turbeville's work made itself felt as a strong factor in centralizing the mission work. A salary was created for a district nurse, and Miss de Turbeville was enabled to give her entire time to the neighborhood nursing. With the progress of her work there has been acquired a well-equipped dispensary and fine bathing facilities. The close affinity between cleanliness and godliness is practically demonstrated by having bathtubs in the church basement.

"Miss de Turbeville saw the need of a day nursery in the neighborhood, so she determined to have one. Through her efforts the money was raised to pay the rent of a home in the Cathedral Mission district, and enough promised to meet the monthly administration expenses. The Day Nursery is fortunate in having a trained nurse, Miss Edith Fox, for its supervisor. What better opportunity could there possibly be for a trained nurse to do humanitarian work than in such an institution as this. Her skill as a nurse may be shown in manifold ways in the care of the little ones.

"Miss de Turbeville's increasing work demanded the services of a second nurse. Mrs. Hutton is with her now, and is a most valuable assistant in the nursing work.

"A very delightfully written article by Miss de Turbeville about St. Dorothy's Rest, the flower of all her work, was published in the first issue of the *Pacific Coast Nurses' Journal*. Mr. Kip, Miss de Turbeville, and Mr. and Mrs. Lincoln, the parents of little Dorothy, in memory of whom the home was named, were the founders of this perfect country home for poor and delicate children. Two ideas dominated the founders in planning this home—use and beauty. How successful they were in the fulfillment of their aim can only be realized by one who has visited the home. St. Dorothy's Rest stands on a hillside overlooking a valley

wooded with pines and redwoods. How to give the children the greatest amount of fresh air seemed to the founders the first consideration in planning the house, so it was built with wide porches extending around three sides of it from both the upper and lower stories. The children simply live on these porches, as they neither eat nor sleep indoors.

"After supper it is the custom to gather in the big living-room, where a huge blazing log in the wide, rough stone fireplace throws bright lights upon the faces of the happy little company. Mr. Lincoln, who is a rector in the Episcopal Church, leads the evening prayer, and then the children in turn suggest a hymn to be sung. After that the little ones go off to their cots on the porches to sleep, and dream, perhaps, the day of happiness all over again.

"This summer will be the fourth year since St. Dorothy's was opened, and each year has brought health and happiness to many unfortunate children.

"While these three nursing centres, the Associated Charities, the Nurses' Settlement, and the Cathedral Mission were working out their individual problems, the seed of a new work was being planted over on Telegraph Hill. Miss Elisabeth Ashe, a young woman who felt there was something more vital and real in life than a society career could offer her, was teaching some of the Italian children on Telegraph Hill the rudiments of good housekeeping by the system taught in the *Kitchen Garden*. Miss Ashe became so much interested in her work among the Italians that she decided to better equip herself to help them by becoming a nurse. She went to the Presbyterian Hospital in New York to receive her training, and when her course was completed returned to the Telegraph Hill people to do district nursing among them. With a large circle of friends who have means and influence, Miss Ashe had no difficulty in getting her work well financed from its inception.

"This Telegraph Hill nursing work was established most naturally with the settlement idea dominating it, and the *Kitchen Garden*, started several years before by Miss Ashe, became the nucleus of a great many social activities. The Telegraph Hill Neighborhood Association, the official title of the organization, has in its growth more than fulfilled the expectations of its founders. Though only two years old, the association has to rent three houses to carry on its rapidly growing work. One is for the boys' clubs with a salaried headworker in charge, another is for the Nurses' Home and women's and girls' clubs, and the third for the dispensary. This latter house is soon to have its upper floor turned into an infirmary. Miss Ashe realizes that there is need for an emergency hospital where little ones may be brought who cannot be separated from

their parents with safety, and where cases that are too ill to take the long ride to a hospital may have proper care nearer their own homes.

"Last summer Miss Ashe had the use of a cottage in the country, where she sent the children who most needed this change. This year Mr. Henry Bothin has placed at Miss Ashe's disposal a farm of twenty-six acres in Ross Valley. Miss Ashe has had the opportunity to show her force and executive ability in the management of her farm, as well as in the development of the city work. She has had a fine vegetable garden planted and the rough cottages transformed into most attractive homes. Mr. Bothin has placed five thousand dollars at Miss Ashe's disposal, so she will be free from the usual harassing problem that confronts most charity workers, of meeting current expenses. The home is now open for the long spring and summer season, and is in charge of a trained nurse.

"There are at present four nurses connected with the Telegraph Hill Neighborhood Association. Miss Daisy Johnson, the nurse who has been longest with Miss Ashe, is her most valuable assistant. Miss Johnson has resided in the Latin quarter with a friend ever since she began her work there, and even though a house for the nurses is being opened she will continue to live in her own home. Miss Ashe says Miss Johnson is, unconsciously to herself, living the real settlement life. Hardly a day passes without some neighbor coming in to dine with her. Yet this is done so naturally that Miss Johnson would be greatly surprised if you should say to her that she had the very essence of the settlement idea—being one with the people, to show them better standards of living.

"In order to come in closer touch with the people Miss Ashe and Miss Johnson have devoted their spare moments to the study of Italian. They are both able now to make themselves understood without the aid of an interpreter.

"The work of the Associated Charities nurses, Miss E. Marie Kane and myself, is naturally not districted, as our cases come largely through the families asking for relief. Miss Katharine Felton, the secretary of the Associated Charities, feels that our work is extremely valuable in bringing the organization into closer touch with the families coming under its care.

"Miss Kane since her connection with the society has taken up the study of Italian and continued her study of Spanish, so that now, through her knowledge of these languages and her real devotion to the Latin population, she has a very unusual influence over these people. 'She is just like a mother to us,' is the remark that I have heard on more than one occasion—sometimes made by women old enough to be Miss Kane's grandmother.

"Since last October Miss Kane's energy has been used in the care of the Porto Ricans. A large colony of these people was imported from Porto Rico by the sugar planters of the Hawaiian Islands. The contract to pay the Porto Ricans a fair amount of wages for their labor was never kept, so with the hope of bettering themselves they keep coming from Hawaii to our city.

"Miss Kane's indignation over this broken contract knew no bounds. She made a canvas of the city last December to learn how many Porto Ricans were here, and tried hard, though unsuccessfully, to have the wrong done the people righted by compelling the planters who had broken their contracts to send the Porto Ricans back to their native island.

"The interest Miss Kane has in these people has been concentrated for several months in carrying out a treatment to cure them of a very peculiar parasitic disease. Doctor Herbert Gunn in his physical examination of the Porto Ricans has discovered the intestinal parasite *uncinaria* in sixty cases besides two other peculiar blood parasites in several cases examined.

"It has been no small task for Miss Kane to get the specimens necessary for the doctor to make his diagnosis of *uncinariasis*. Her work does not end there, for after the case is discovered the treatment must be given. It is very difficult to persuade the patients to take it. Here Miss Kane's devotion to these people displays itself, for she gathers them in from their homes, conducts them to Miss Ashe's dispensary, lent to the Associated Charities for this purpose, and stays all day with them to be on the watch for any adverse symptoms. Sunday is the day chosen for this, as there is no time to spare during the week.

"The *filaria*, a blood parasite, only shows itself in the blood at night, so Miss Kane and the doctor go out at night on their hunt for this enemy.

"Dr. Herbert Gunn says this extremely important work for San Francisco of eradicating this disease *uncinariasis*, which is infectious in the same way that typhoid fever is, could not be accomplished if it were not for Miss Kane's strong influence over the Porto Ricans. They have a strong prejudice against the treatment, and besides that it is a bother, which to a race from the tropics is reason enough for not doing a thing; but Miss Kane has proved herself to be such a loyal and devoted friend to these strangers in a strange land that for her they will overcome their prejudices and inertia and be cured.

"One of the distinctive features about the visiting nursing work in San Francisco is that its four nursing centres originated with nurses and not with the laity.

"A very natural criticism of our work is our lack of organization. We realize ourselves at times the disadvantage of not being one society, but also see the impossibility of surmounting this obstacle on account of the distinctive nature of each organization. The law of compensation is manifested in our deficiency, as it is in nature, for what we lack in one way is made up to us in another. We feel that settlements and summer homes are our compensation.

"I have said nothing about our actual nursing, for the reason that there is nothing distinctive about it, and why should there be, as we have modelled our nursing after yours in the older established visiting nursing centres? In our civic work we are behind you, but we do not mean to remain there. We are making our fight against tuberculosis, though not as yet in a well-organized way.

"One of our members was instrumental in having the law passed that every case of tuberculosis be reported by the physicians to the Board of Health, and that the rooms occupied by tuberculosis patients be disinfected.

We have been made auxiliary Health Inspectors, and have the authority to serve papers on the lawbreakers who do not obey our orders. Any doubt expressed as to our right to demand obedience to the law is immediately dispelled when we show our large badges. We are especially severe on the owners who allow garbage and other refuse to accumulate on their premises and on the breakers of the anti-expectoration law.

"The salvation of any city from disease must come through its cleanliness, and this can only be accomplished through the enforcement of laws that demand clean homes and streets. Who is there with greater opportunity to instruct the ignorant in the imperative necessity of obeying these laws than the visiting nurse, for she carries with her the authority conferred upon her by the city, and the influence she has gained by the care of the people in the time of their greatest need."

MISS WALK.—I presume, unless there is a decided expression or wish to the contrary from the floor, that the morning's meeting will conclude with the excellent paper of Miss Fisher's just read by Miss Thornton. It may be well just here to tell you of Miss Walters's very valuable work in compiling statistics of district and visiting nursing. She will be very glad to receive names and addresses of nurses engaged in these branches of nursing.

I should like to have some expression as to whether further discussion is requested. The evening's session deals with subjects very akin to those of this morning, and the discussion of these papers this evening should bring out a good deal that was perhaps omitted this morning.

The meeting is adjourned to meet this evening at eight o'clock.

Thursday, May 4.

EVENING SESSION.

Meeting called to order at eight o'clock.

PRESIDENT.—Our exercises for the evening will be a continuation of the programme of this morning. I have the honor to again present to you Miss Wald, of the Nursing Settlement of New York, who has kindly consented to conduct the programme for us this evening.

Miss WARD.—It is very satisfactory indeed to have for the next paper a subject which appeals to all of us, I think, as a very important phase of the development of the visiting nurse. Miss Rogers, Supervisor School Nurses, New York City, will read this to you and tell you of the present satisfactory condition of the public school nurse; those of us who have seen her growth and the readiness with which the community has accepted her, and now I may say tenaciously holds on to her, feel sure that she will be established in other cities. I therefore have very great pleasure in introducing Miss Rogers, who started the public-school nursing and has carried on the work in New York City.

THE NURSE IN THE PUBLIC SCHOOL

By LINA L. ROGERS

Supervising Nurse New York City (Health Department)

"Medical school inspection dates as far back as 1842, when the laws of Paris ordered that 'all public schools should be visited by a physician, who, in addition to inspecting the buildings, should also inspect the general health of the children.'

"The system since then has undergone many changes and developments, greatly enhancing its value and efficiency. Boston inaugurated a system of daily inspection in 1894, the result of an outbreak of diphtheria. In 1895 Chicago followed with nine inspectors for the whole city, giving each doctor about thirty schools to look after.

"In October, 1896, owing to epidemics of measles and scarlet fever, the Department of Health of New York City assigned an inspector to investigate the conditions in the schools. Visits were made to those schools from which cases of contagious diseases had been reported, and especially to the classes from which the child had been excluded. Those who were not in school were visited at their homes by the inspector to learn the reason of their absence. The result of this investigation showed that a number were ill with contagious disease contracted in the classrooms, where the conditions favored infection on account of the overcrowding, bad air, etc. Some children attended school while the home was infected; many times children were found in school with diphtheria in an advanced stage, the only indication being that the child had some slight sore throat, and but little attention was paid to it until the child was critically ill. In other instances children had

returned to school after scarlet fever during desquamation, a period which is not only dangerous to the child itself, but to all others. A case is cited of a boy pulling large pieces of skin from his hands and passing it around among his classmates as souvenirs, which they verily proved to be.

"The outcome of this investigation resulted in a special appropriation being made which enabled the Department of Health to appoint one hundred and fifty inspectors at a compensation of thirty dollars per month.

"In March of the following year, 1897, each inspector was given two or three schools and his duty was to report daily between nine and ten A.M. at each school, examining all children sent to him by the principal or teachers. Then only contagious diseases were taken charge of by the inspector. When a case of scarlet fever or measles was discovered, a telephone message was sent to the Health Department, and a diagnostician was sent at once, so that the diagnosis might be confirmed and the proper directions given as to the isolation of patients, care of others in the family, etc. A postal card was sent to the principal of the school informing him of the presence of contagious disease, and with instructions that all children of that family be excluded from the school until the termination of the case; also that they *must not* be readmitted until they could show properly signed certificates that the premises had been fumigated and were free from contagion.

"Other children with minor contagious diseases, such as ringworm, scabies, sore eyes, and pediculosis, were sent home until proof of cure could be shown. Printed forms were filled in and given to each child to take home to its parents stating the name of the disease, and this ended the inspector's duty. *The objective point in this system was exclusion.*

"It will be seen that a large share of inspection fell upon the teachers in the classroom, inasmuch as it was their duty to pick out the suspected cases and report them to the inspectors." In 1902 the system was reorganized, and the inspectors were requested to make 'routine inspections.' Each classroom in the school was visited once a week and every child was examined individually by the inspector. This, of course, relieved the teacher of the duty of selecting the suspected cases, a duty they frankly confessed they were not competent to perform. The physician's practised eye took in at every glance abnormal symptoms, and doubtful children were sent to the inspector's room for a more thorough examination. As a result of this the child was either returned to the classroom or sent home with his card.

"It was found that under this new system fifteen to twenty chil-

dren were excluded daily, and that in a single school three hundred children were out at one time. The serious depletion of the classrooms as the result of this thorough inspection drew criticism from the official head of the Department of Education. To solve the complication that had arisen, the introduction of the school nurse was proposed by the Nurses' Settlement, which planned the work and provided the means.

"The system had been in vogue in a small way in London, through the efforts of Miss Honnor Morten, herself a trained nurse and a member of the London School Board.

"In New York, with the consent of the Departments of Health and Education, one month's experiment was entrusted to me. I began by taking a group of four schools with an attendance of eight thousand six hundred and seventy-one in the crowded part of the city, spending an hour in each daily. The principals provided the only available place that could be found, which was a corner of the indoor playground, the window-sill doing duty for a table. All the necessary dressings, etc., including the basins used, were furnished by the Nurses' Settlement.

"The doctor in the school was consulted and arrangements were made for having those children needing treatment sent to the nurse's dressing-room.

"The Department of Health outlined a course of general treatment which is used throughout the schools. The Department of Education at this time provided the necessary supplies and has continued to do so.

"At the appointed time each child was attended to as his needs required. Sore eyes were washed with boracic acid solution; ring-worm scrubbed thoroughly with tincture of green soap and water, then with bichloride of mercury, and finally painted over with collodion to prevent contagion. Other skin diseases were treated according to their condition. As soon as the children received treatment, they were returned to their classrooms. *The saving of school time for the children was of the greatest importance.*

"When all the children had been attended to and the dressing-room put in order, a list of the children sent home was obtained from the clerk. The children who were suffering from serious disorders too advanced to be cared for in the dressing-room were sent home and the name and address of each was taken. These were visited after school hours on the same day, and necessary instructions were given in ample detail, and wherever necessary a demonstration was given, for many of the mothers who were seen proved to be, though kindly disposed, very ignorant of even the simplest and most elementary methods. For trachoma and unusually severe forms of other diseases (principally of the eyes and skin) the family physician was suggested. If the family

was too poor to have a doctor, the dispensary was called upon, and addresses were provided of the free clinics in the city. The unclean heads constituted about two-thirds of those excluded, and as soon as the mothers were enlightened as to the nature of the trouble and the remedies suggested for it they willingly obeyed orders, and the child was allowed to return to school at once. All children excluded by reason of minor contagion (eye diseases, ring-worm, scabies, favus, impetigo, and pediculosis) were allowed to return as soon as they could show proof of having begun treatment. Through the nurse's sympathy and willingness to give a helping hand and advice and sympathy concerning the home, the mothers considered her a personal friend and were most willing to do whatever was requested.

"At the end of a month of twenty school days (and six of these were Jewish holidays, when sometimes only thirty pupils out of two thousand attended school) the result was more than satisfactory. Eight hundred and ninety-three treatments were given, one hundred and thirty-seven visits were made to the homes, and twenty-five children returned to school, some of whom had been out whole terms for a slight skin trouble.

"In November the Department of Health, being firmly convinced that this completed the link in the chain of medical inspection, offered me an appointment as a regular member of the staff. During the month the work increased in the school and over eleven hundred treatments were given. As the work developed, the nurse often discovered in examining the unclean heads more extensive trouble, and many times the scalp was found covered with eczema and favus, the direct result of the lack of care in combing and washing the heads. The increase of work within the school left less to be done outside, and consequently there were not as many visits made, but as the visits to the homes count for much as a social factor and educationally, they were continued as an important feature of the work.

"In December, 1902, twelve nurses were appointed with one supervisor. The work proved so far-reaching in its good results that the Board of Estimate and Apportionment appropriated thirty thousand dollars for the year 1903. This sum provided a staff of twenty-seven nurses at nine hundred dollars salary per year each, who took charge of one hundred and thirty-one schools with an attendance of two hundred thousand children.

"With the introduction of the staff of nurses the old system of medical inspection was entirely reversed, so that, instead of its objective point being exclusion, it became *the keeping of children in school under supervision and treatment.*

"When one considers how short a child's school life is, it becomes essential that not one hour be lost if it can be helped. This is constantly kept before us, and the nurses grow very keen in discovering the children who are deprived of their schooling.

"From the time of ancient Rome, Greece, and Egypt, when records show curative measures employed in schools and colleges, through the preventive stage, when modern medical inspection began (which was considered a great advance over the other), we have reached the stage of having both the curative and the preventive measures combined—not only curing those with disease, but protecting the others.

"Among the conditions found by the nurses in their daily rounds were many opportunities for being helpful along various lines. Walmer, a boy aged ten years, had never been allowed to go to school. He had a stepmother, father a drunkard. The boy was sent out at six in the morning to the Grand Central yards to steal coal, and was beaten if he returned without a certain quantity. He was insufficiently clothed and fed. A stepbrother about the same age received all that could be furnished. The case was reported to a suitable relief agency, but the nurse meanwhile found a friendly home for the boy before any further investigation was made, and he is now happy.

"In another house a family of father, mother, and six children were found living on one meal a day. This was an evening meal of baked beans or potatoes. The father, a hodcarrier, had been out of work for months. Tony, nine years of age, was found in school with abscesses on his neck and so weak that he could hardly stand, having had nothing to eat since the day before. The nurse took him home, and when the above conditions were found relieved the immediate wants. The teachers in the school on hearing of the poverty contributed five dollars at once, and the case was reported to the relief agency, which sent groceries and other necessities. The nurse did not feel that her efforts were finished then, but found work for the oldest boy at four dollars and fifty cents a week, the father got temporary employment, and a neighbor loaned the mother a sewing-machine and work was found for her. Tony was placed under treatment at a hospital and had a plaster cast put on.

"These are but instances of what is constantly being done by the nurses, apart from the work which is required of them by the Department of Health. And where could one find a greater field or a more useful service for the bettering of conditions in a great city than what is done by our present staff?

"This ideal system, it is our belief, can only be attained by having nurses in the schools. The statistics of the Health Department from

September, 1902, to September, 1903, show that ninety-eight per cent. of the children previously excluded for medical reasons are retained in their classrooms since the advent of the trained nurses in the schools.

"In 1904 the staff was increased to thirty-eight nurses, which enabled us to cover one hundred schools in Greater New York.

"We have received from the principals most hearty coöperation, and many letters are received by the Health Department expressing gratitude for the care taken of the children and for the difference in the regular attendance as well as the standard of cleanliness secured. It is gratifying to report that the parents, with rare exceptions, are grateful for this attention and take pains to carry out whatever instruction is given.

"In February of this year the work of the medical inspectors was again reorganized, and 'routine inspection' is made only once a month. As soon as the doctor has indexed all the names of children needing attention or advice, the cards are turned over to the nurse and she is responsible for every child until he is cured (in school). The doctor calls at the school every day and any emergency case is brought to his attention, the nurse taking care of it in the meantime. After the doctor's routine inspection is made he proceeds to make a thorough physical examination of each child. The eyes are tested for defects of vision, headaches, squint, blurring, etc.; the ear for deformity of external canal, discharges, defect in hearing; the teeth and hard palate are examined and adenoid growths looked for; the nasal condition is noted, whether the septum is deflected, occluding the anterior nasal spaces. A general record is made of the nutrition of the child, the glands, choraic symptoms, cardiac murmurs, pulmonary disease, mentality, and skin lesions. The spine too is carefully gone over and any deformities are noted, as well as those of chest and extremities. In every instance where irregularities are found and the child fails to have treatment reports are made and the nurse visits the home, explaining the condition and urging a more complete examination and treatment.

"During the present year our staff has increased to forty-four nurses to look after the health of over three hundred thousand children under the direction of the Department of Health.

"Apart from the recognition of the nurses' professional ability to do the work, the privilege should be a source of no small gratification that the nurse can play so important a part in this essential service to the community."

MISS WALD.—I have asked Miss Rogers to remain upon the platform, believing that questions may be asked from the floor that she will be best able to answer. I would suggest, if I may, that if any of you here anticipate the intro-

duction of medical inspection through the doctors or through the doctors and nurses in the community that you might like to take advantage of this opportunity to learn more in detail, possibly points that Miss Rogers may have omitted to state in her paper. To those who live in smaller communities it is perhaps necessary to make some slight explanation of the absolute necessity of this in New York, where the little children of to-day are the citizens of fifteen years hence, and where all the methods of education in the primary grades are so dependent upon the physical condition of the child that the school nurse has her very best opportunity to serve the community by making the best possible future citizens of the little ones who come under her. We are in the beginning only of the medical inspection of the public schools. The last method employed by the Department of Health of New York demands an examination of the entire body of the child and is a very important step; the rest will follow very soon. I believe in a very few years the condition of the buildings will be entrusted to the nurse. This is a very important matter, and Miss Rogers is now ready to be questioned.

MISS NUTTING.—I am very glad to say a few words about the nurse in public schools of Baltimore. Medical inspection of schools was begun here as an experiment last February, when two doctors and one nurse were placed on duty simultaneously in a group of public schools for five-months' trial. The work was undertaken by the Board of Health at the request of the Maryland State Federation of Women's Clubs. It is interesting to know that on the very day on which the petition to the Board of Health was presented by this body the Maryland State Association of Nurses held its annual meeting and invited Dr. Darlington, president of the New York State Board of Health, to speak on the subject of "The Medical Inspection of Schools" and "The Work of the School Nurse." Dr. Darlington's address was given before a very large audience and aroused a good deal of public interest. A petition from women's clubs coming at the same time was one of those fortunate coincidences which probably helped matters along. Although the work has been going on about three months, it has, I believe, proved very satisfactory, and there is every expectation that it will be permanently established in the autumn with a larger staff of workers.

I would call attention to two interesting features in the establishment of this important work in Baltimore, and one is that it was begun by the municipality through the Board of Health; the second is that the doctor and the nurse were placed on duty simultaneously with a full appreciation of the fact that the work of the doctor was of limited practical utility unless supplemented by that of the nurse.

MISS CARR.—I have nothing to add to Miss Nutting's remarks except to point out what seems to me the importance of nurses' associations acting so far as they are able to with other organizations in the same city. As Miss Nutting pointed out, the effort of establishing the school nurse in Baltimore was due in a large measure to the Federation of Women's Clubs, and I think these efforts were made because of the association which that Federation has had for two or three years with the nursing societies in Baltimore. About the work itself I have nothing to add, because I have not come personally into contact with it.

MISS WALD.—Some cities have, I am sure, from the inquiries that have reached New York, thought of the introduction of the school nurse. Perhaps Miss Riddle will tell us what has been done in Boston.

MISS RIDDLE.—I would suggest a very practical way of your getting at this

matter. Send for Miss Rogers to come to your city and address any collection of its important citizens, as she came to Boston and aroused the enthusiasm of the Twentieth Century Club, one of the most important that we have in the city, and through it even awoke the Board of Health in Boston, which has always been noted for its self-satisfaction. Send for Miss Rogers to come to your city.

Miss NUTTING.—I would like to say that the nurse on duty in Baltimore has extended her work just as much as she has had time and strength to do it into the homes from which the children come; that is why children have through her work been able to attend school who otherwise could not, and that very important point is much emphasized by her work there.

Miss WALD.—I should like to suggest again to the communities that are perhaps considering the introduction of the school nurse that the Departments of Education prove quite as eager and as interested in the movement as the Health Departments, and it may be in communities that are more especially fortunate in their Educational Departments than in their Health Departments that the introduction might come through them. Miss Rogers gave you the figures of ninety-eight per cent. who had the previous years been excluded who were afterwards able to attend school. I feel personally much interested in the development of the school nurse.

Miss NUTTING.—With renewed apologies I must add one further word for fear I have left you under a misapprehension. The Board of Education of Baltimore was consulted; some members of the Board of Education did appear on the platform at the meeting and they gave their most hearty approval and coöperation to the Board of Health in establishing the school physician and the school nurse. Has there been any difficulty in any town or city so far as you know in that kind of coöperation with the Board of Education?

Miss WALD.—Perhaps someone is here from Rochester. I think that so far they have not been successful in getting the school nurse.

Miss PHILLIP.—This spring an ordinance was passed providing for twelve medical school inspectors, but we have not the school nurse yet. The Board of Education and the Board of Health are very much in favor of it and say that we will have the school nurse next year.

Miss WALD.—Are there any other questions or is anyone else able to contribute to the discussion of the evening?

Mrs. QUINTARD.—I should like to ask Miss Rogers what the school nurses do in the long summer vacation.

Miss WALD.—I think that is a very practical question and will probably lead up to Miss Rogers explaining a service which is under her supervision in the Department of Health in New York City.

Miss ROOMS.—During the summer months, July and August, when the schools are closed, the nurses do regular district nursing wherever it is to be done. The city is divided into districts and a house-to-house inspection is made of all the children under one year of age. The names are taken and indexed, also the history of the child and the conditions of the home, and wherever a child is ill, a nurse is sent to do whatever is necessary, to give baths and different treatment as ordered by the doctor. Where the children are not ill the mother is taught how to prepare food for them, look after the milk, etc., take general care of their health, the bathing, and that sort of thing. Milk tickets are given to the nurse for distribution, and ice tickets are also given during the summer.

Mrs. QUINTARD.—The subject of school nursing has been agitated in Phila-

delphia during the past two years, but so far very little has been accomplished. That little has been confined to the services of one nurse under the auspices of the Visiting Nurse Society, who is paid by a number of the Board of Managers of that organization, so that it really is a private enterprise. The work began with one school of sixteen hundred pupils and has gradually increased until at present we have six schools, and the whole six are very well cleaned up.

The result has proved so satisfactory that the work has appealed very strongly to the principals of the schools and the Board of Education. The question of organizing a staff of nurses sufficiently large to cover a majority of the schools has been brought before the Bureau of Health, and appeals have been made to the Mayor and City Council with the hope of obtaining funds for this purpose, but with no definite result so far.

Dr. Edward Martin, chief of the Bureau of Health, appears very much interested in the question, but gives very little encouragement as to an appropriation for this purpose in the near future. In the meantime we hope to be able to carry on the work, and every effort will be made to accomplish our end.

Miss WALSH.—Is there anyone here from Buffalo, as I would like to know whether there has been any definite effort to introduce the school nurse there?

Miss GROSS.—As far as I know, nothing has been done in connection with public-school work at Buffalo.

Miss JOHNSON.—The subject of the school nurse has been agitated in Cleveland. The Visiting Nurses' Association there has asked permission of the Board of Education to give a trial of the school nurse for five months in the schools; the suggestion has been met with hearty cooperation and sympathy from the Board of Education and the work is soon to begin; the five schools have been selected in the most congested part of the city and we hope that it will result in something permanent.

Miss WALSH.—That seems a very encouraging report. I agree entirely with Miss Nutting as to medical inspection, that the child in the school should properly be cared for by the municipality; in New York those who had the school nurse at heart delayed introducing her until the authorities seemed favorably inclined to her consideration. It is very true that New York in that respect has the advantage over other cities. Probably other communities are not so awakened—so that if it is not possible to introduce the nurse under municipal authority immediately, as in Baltimore, which certainly did start under most fortunate and favorable conditions, it would seem quite worth while for some voluntary agency to make the experiment; perhaps it would then become a necessity and would be so regarded by the community.

Miss PALMER.—We had an illustration of your point in Rochester, where the experiment of three months of medical inspection was paid for by the Public Health Association itself. The medical inspectors were employed and were paid for during a term, I think, of three months simply to demonstrate to the public the value of such service, and after they were discontinued it took a very little while to bring the city authorities to realize that it was a work that must be continued, and a fund has since been raised for the carrying on of such medical inspection.

Miss CAMP.—I have been asked to find out from Miss Rogers whether she considers that any previous training in the district nursing is essential to the school nurse doing her best work. A nurse who has taken that up in Baltimore feels that her training in district nursing was worth so much that she would

never have been able to accomplish what she has without the previous training which she had in district nursing work.

Miss ROUSSE.—I think that is very important, Miss Carr. I think I myself would not have gotten along as well if I had not had the training in the Nurses' Settlement. In selecting our nurses we make that a very strong point. If a nurse has not had training in that sort of work or has had no training outside of the hospital, we feel that we had better select one who has had, although that does not deter her from being taken on the staff.

Miss WALD.—We will proceed with our programme and hear a paper by Mrs. von Wagner, who has successfully proven the efficiency of the nurse in one other phase of public work, and that is in the inspection of tenement houses.

THE NURSE AS TENEMENT-HOUSE INSPECTOR

By JOHANNA VON WAGNER

Sanitary Inspector of Tenements, Yonkers, N. Y.

"Eight years ago I commenced the work of tenement-house inspection in Yonkers. The Civic League had been requested to look into the housing conditions by the Health Officer, who was unable to cope with the problem. Following the example of many cities of Great Britain, a woman inspector was chosen. The experiment having proved successful, the Board of Health was persuaded to adopt the office in the beginning of the year 1900.

"It has been a great experience as well as a privilege to work in connection with one of the most important offices in the city's government. To have the right to enter all premises at all times, to come in contact with all phases of human life and misery, is in itself a liberal education. The fact of my being a nurse made the work more effective and beneficial.

"Our most precious possession is health, and if a nation's wealth is its health, then all efforts towards better public health should be increased and encouraged. Public health can be improved only by better sanitation and hygiene, which comes under the head of preventive medicine, the knowledge of which is so woefully lacking in most of our homes. It is a field that rightly belongs to doctors and nurses, and may the near future see more teachers in our professions than simply healers.

"The greatest good derived from tenement inspection is the knowledge of housing conditions and bringing them before the public, and once the facts are published the remedy for better conditions must be found. It is astonishing how little one-third of the people know and care to know about their neighbors who are allowed to live by the grace of landlords in so-called tenements.

"A tenement house is one of three families or more, and even in

Yonkers we have houses with twenty to thirty families—six families on one floor, two in the front, two in the middle, and two in the rear; front and rear have light rooms, middle rooms have air-shafts. Imagine people condemned to live without sunshine and very often without air! Yards are more and more disappearing and people take their recreation on the streets, which life is especially harmful to children.

"In large tenement houses ashes and garbage very often are kept in cellars or under areas for lack of space, which causes a great nuisance, as in very few cities refuse is removed every day—in Yonkers only once a week, in winter perhaps once in two weeks. The only windows that might be opened very often have to be kept closed because of the offensive odors arising from decomposing animal and vegetable matter.

"Another disadvantage in tenement houses is the lack of closets and store-rooms; a great many tenants have only a dish closet, so clothing and food are suspended on lines in kitchen and bedrooms. Fire-escapes are used for cold storage in winter and, of necessity, hot storage in summer. Soiled clothes are usually kept under the bed until wash-day, the garbage-pail and wet rags under the sink until such time as it is convenient to make a journey down to the cellar or yard, and if toilets are not on the same floor a slop-pail is suspended from the window, much to the annoyance of the tenant on the floor below, or is kept in the hall or bedroom and becomes a positive nuisance when kept for days.

"Yard and cellar toilets are a hardship for any tenant, besides being in nearly every instance a nuisance. Women with large families of small children have to keep a slop-pail somewhere, as it would be impossible to climb three or more stairs whenever needed. Toilets in yards are apt to become out of order, especially in winter, when the water freezes and the usual condition of overflowing toilets occurs and tenants throw slops on the ground. Toilets placed in cellars are perhaps even more of a nuisance—first of all because of the darkness, and, second, of the bad odors that permeate the house, as such places are apt to be very filthy. It is not unusual to stumble over a drunken man who has gone down to the cellar to sleep off his debauch; this happens when the first floor is a saloon. 'Lady, don't go down there, there is a drunken bum!' Women tell me that children refuse to take necessary remedies because they do not want to go down to the cellar. It was in a family that had always lived where toilet accommodations were in the cellar that after moving to better quarters the little girl said to me, 'Oh Miss von Wagner, we have the cellar on the floor with us now,' the toilet being in the hall in the new flat. Those that have done district nursing and had occasion to spend day and night in such places can readily realize the hardships of such conditions.

"Sinks are very often placed in halls, and three or more families

use one sink, which on washdays, early mornings, and evenings when the men and women return from work presents an interesting sight—a line of people waiting their turn to wash off. Among the foreign population washbasins are unknown and ablutions are performed under the faucet. Once a week, usually Saturday afternoon or evening, a tub is filled with water and placed in the kitchen, and should one enter at the right time one can see half a dozen men bare to the waist standing around the tub bathing at the same time; in the same way the family shares the tub later on in the evening.

"Just think how hard it is to keep clean under such conditions. No wonder a woman said to me a few days ago that if the landlords would only put a bath in the basement for the use of the tenants, it certainly would be a blessing in these densely populated districts and prevent a great deal of disease.

"Overcrowding is one of the inevitable and worst features of our present day tenement-house life. Immigrants certainly come here with the idea of bettering their conditions and earning more money. They do not earn sufficient to live decently and save, which is their greatest aim, so in order to save all rooms are sublet except the kitchen, which serves the family as living- and sleeping-room; sometimes the whole family occupy one bed, especially if the children are small. The boarders are packed in according to the size of the room—two, four, six, or eight—sometimes the night workers going right in and occupying the beds vacated by the day workers. The characteristic bedroom smell cannot be gotten rid of even with good ventilation. Fancy the condition if bedrooms are not ventilated!

"The family that is striving hard to save money is the one that suffers most. The woman receives from each boarder two and one-half dollars for sleeping and washing per month; the men and women feed themselves, which is simple enough, as each one has his own loaf of bread and coffee-kettle. The woman cooks a large pot of soup and dough similar to macaroni and the boarders can have a dishful for a few cents. There is great competition among these women for keeping boarders, and that is the reason board is so cheap.

"The effect on family life is demoralizing, besides being deadly. The little children die for want of air more than from any other cause, especially those under one year. If they survive the first year, they are very apt to succumb to digestive disturbances during the second or third year, because nothing is too good for the baby—sauerkraut, sausage, meats of all kinds, cucumbers, tomatoes, and now and then a glass of beer or a little wine, even whiskey. Do we wonder at our high death-rate among children under five years of age? When I tried to stop a

woman from pouring a glass of beer down the baby's throat she said, 'It is only for good luck.'

"The larger children live the life of the street, and where else could they be? The vices and temptations of such a life leave their mark upon the young, and reformatories and prisons are filled greatly from these congested centres. If not morally, the child has suffered physically, grows up a weakling, enters the factory, is a prey to tuberculosis, dies young, or else survives long enough to get married and before many years leaves a widow and usually sickly children. The girl does not fare much better; factory life is not conducive to good health or self-development; a great many young girls die of consumption; if they live and marry, they are unable to make homes; they know nothing about motherhood. The lack of that knowledge is paid for dearly in the waste of human life; almost without exception the first-born children die, and in most families many more follow. The unnecessary grief, expense, and ensuing poverty might have been saved. 'A birth and a death every year,' as is often said; 'undertakers' bills are more expensive than raising children.' In a great many instances the death of a child is taken in a very matter-of-fact way; if any sympathy is extended, one is rebuked with: 'My child is not any too good for the Lord; if He wants it, He can have it.' When one considers their income of nine or ten dollars a week it is not surprising. Another cause for this indifference may lie in the evil of child insurance, especially under five years of age; it is customary among the foreign population to insure all children, even the infants. The woman frequently goes out to work to help along, which necessitates the neglect of children and is apt to tell on their physical as well as moral development.

"The drink problem is a great one in all industrial cities. Some factories compelling such unwholesome and hard work, men feel obliged to get stimulants from the everywhere present saloon. The men can always get credit there when working, and on payday that bill is the first one to be settled. Never mind the butcher and grocer. Credit is much more easily obtained there, and if anybody is the loser it is the latter. A shiftless drinking woman is not only a curse to her own household, but a bad example to the neighbors; she will invite others to share a drop and household duties are neglected; proper meals not provided, and dirt and disease soon follow. I have known many nice young women to be utterly ruined by such examples. It is much harder to break up this habit in women than in men; once in a while a man will take the pledge and keep it, while a woman most always will suffer relapses. Visiting in such homes helps a great deal, befriending and advising and suggesting proper nourishment, keeping the woman well

occupied and not forgetting to furnish a little pleasure in her life of drudgery; in winter taking her to some good entertainments and lectures, in summer giving the families outings—something to look forward to, something to add to her life, to make living worth while; making her acquainted with the beauties of nature, art, and music; giving her something else to think about besides where the next meal is coming from. It will make her gentler and certainly happier. One widow who had for thirty years desired to have a piano had at last been able to get one—thirty years of wishing! and then the piano came on the instalment plan; a grown-up daughter was to take lessons. As I entered I heard the queerest noise—someone playing softly and singing without the least idea of keys or tune; I looked in and saw my friend on the piano-chair, the greatest joy transforming her face—a pathetic sight. All these years had she waited, and now her wish was realized!

"When a woman tells you that for fourteen years she has not been away from home, has seen nothing, heard nothing new or helpful—has born ten children, lost six, has walked the floor nights because of worry, grief, or sickness—you feel that someone is to blame for such conditions. This is the case of many.

"What did Yonkers do before you came?" the people often say. They know that I have come as a friend, and even the impossible is requested—not only to heal the sick, but care for the well, give them work or better positions, help the children to get a better education, to save them from factories, help them to learn a trade, go to business college, find decent houses for them to live in, place children in institutions, be a guardian until orphans are of age, spend my Sunday with the family—it keeps one so utterly busy that self is forgotten; so many people's burdens come into one's life that our own are never thought of. One only wishes that one could do more, help more—and also wishes for more trained workers, especially nurses. 'What shall I do for the baby?' is the daily question. The many sore eyes, ears, the different deformities; tuberculosis; the prevention, spread, and isolation of contagious diseases—all prevention of these diseases would tend to lessen poverty, sorrow, and increase happiness, all of which comes under our province.

"Christ said, 'Go ye and preach the Gospel.' So must we go and give our knowledge and experience to the largest numbers and teach cleanliness and health to those that have a right to know and a duty to obey. Of what use is sanitary legislation if its laws are neither known nor enforced?

"The children seem to have the right idea of our work. 'Here comes the city,' they say at my approach. 'Lady, we will show you

where the dirty floors are,' tells the tale. One girl, seeming very much interested, followed me from cellar to roof, and when I was ready to go exclaimed, 'Lady, is the Board of Health your husband?' A Polish woman came to the same conclusion. Entering the office where I happened to be alone, she asked, 'Where is the Mr. Board of Health?' I said he had gone out. Then she asked, 'Are you the Mrs. Board of Health?' and stated her troubles. With the Italian children I am the policeman of the houses; with the English-speaking children I am the sanitary lady; to some I represent the law, to others cleanliness. It is by no means an easy work, even if the most interesting that falls to any worker. One deals with human life in all its aspects—certainly not appreciated by many landlords because of the expenditures in improving property, neither by the shiftless and dirty tenant, but always much appreciated by the much neglected children.

"But nothing should discourage us; we are the servants of the people and must consider their interests first and foremost and help them to their rights. The right to work they all have—the right to live decently society would deny them. The saloon for the man, the street for the child, the kitchen for the woman. Let us help to change this; let us work for airy, light, clean homes; parks, playgrounds, and baths for those who have been deprived of them, and so work out God's law—'Love thy neighbor as thyself.'

"The great pity is that we do not know our neighbors in the city. The Italian, Slav, and Armenian live their own lives, bring their own customs, and cannot readily adapt themselves to new laws and civilized ways, and yet they wish to learn and better their conditions. The Hebrews and Italians are quicker to improve; the Slav is slow and stubborn—it takes more patience and time to overcome deep-rooted superstition and prejudices, but even there I see improvement, and the first thing often said to me now is, 'I keep men no more; live all alone.'

"The people need a helping hand. The American citizen must become acquainted with his foreign brother and give personal service to prevent colonizing large bodies of foreign born. Our mission is right here in our own cities. Settlements have been of the greatest blessing, and it is in connection with them that the greatest good can be accomplished. To live among the people is the best way of knowing and influencing their home life. Personal service is needed even if we do break down—the individual often must be lost for the cause of all. The nurses entering this field will feel, I am sure, as I do, that it is a privilege as well as a help to self-development to do work in which one constantly has to appeal to the best in human nature.

"In the city's housekeeping woman has her place, and the nurse

especially is well fitted to fill it. Woman is more practical and economical by nature than man, and it is with women we deal in the homes. It is our right and duty to share in the work.

"When contagious disease breaks out, besides inspecting the premises the condition of the sewer is ascertained and the Department of Public Works notified. The present outbreak of meningitis I have often thought had some connection with unsanitary conditions in house or street; if sewers could be regularly flushed, I think all filth diseases could be lessened.

"Results from our work we should not look for, but leave it to God; no effort is ever lost. We sow the seed, and in the most unexpected way it will grow and multiply. Better homes, better citizens, more workers, less disease and poverty, more public-spirited citizens, more funds for relief, more public sentiment, better public government.

"The last result this year has been the organizing of a large body of men and women into the Sanitary League with the object of improving public health, at present devoting their energies to the prevention and spread of tuberculosis and isolation of patients in some hospital near Yonkers.

"I hope to have shown the need of nurses as sanitary inspectors sufficiently for many to prepare for and enter this field. Every city has a housing problem and therefore needs us.

"Let us go and preach the gospel of cleanliness. As Dr. Richardson said: 'Cleanliness covers the whole field of sanitary labor; it is the beginning and end?'"

MISS WALD.—I am sure that all agree that Mrs. von Wagner's paper is a sermon, and we are all ready to subscribe to her text. The paper is open for discussion. If there is anyone here who can contribute anything further to the subject of the inspection of tenements, she will be most welcome to take part; if there is anyone who has had experience or who can speak for the community we would like to hear her; or perhaps someone would like to ask questions of Mrs. von Wagner.

MISS NUTTING.—I should like to ask if she has much difficulty with the landlords, whether it is the question of landlords or just where the special difficulty lies.

MRS. VON WAGNER.—I think the greatest trouble lies with the landlord. He goes to the Common Councilman and to the Mayor; the landlords are the worst people to deal with; where I can get hold of a landlord I talk to him and tell him that I am working in his own interest, I am educating his tenant to be clean and take care of his property, and what I want him to do is to keep his house in good condition; it is much better for any landlord to repair his property and keep it as nicely as possible, because he can get better rents and a better class of tenants; it is in the most ramshackle buildings that people do not pay

the rent; after I have educated the landlord then I get better conditions. I am always glad to see the landlords, but they do not like me; they have formed a Landlords' Protective Association, and their one aim and object is to remove that woman inspector, but I think in order to help them and defend myself, if I had the means, I would immediately become a property owner, no matter how small, and I would join them.

MISS WALD.—I should like to ask Mrs. von Wagner if Youkers has not had a Tenement-House Commission or whether the Sanitary League has not looked into the matter of the housing of the people, or whether some such movement is afoot.

MRS. VON WAGNER.—No, it was the Civic League that took up the house inspection and made this position possible at first. Then I collected statistics and brought before the public the condition of the houses; it was so bad that the Civic Club decided to take up the matter of the changing of the building code and the sanitary code. The worst kind of a tenement was possible in Youkers; one man who has travelled a great deal said about one house which we have and call Castle Garden that there was nothing like it in Glasgow or Edinburgh, and the tenements in these cities are supposed to be the worst in Europe. Then the Civic Club appointed a committee to change the building code and the Board of Health changed the sanitary code. The 1st of May the new law went into effect, and now we shall have better conditions.

MISS WALD.—Before closing this topic I should like to say that there are tenement-house inspectors in the department of New York City. I believe that the nurse is very acceptable, and, all other conditions being equal, that she has had the preference in receiving this appointment. Mrs. von Wagner would probably know how many there were. Certainly when the question of the tenement-house inspector came up the public tried very hard to get nurses who might have had some training or some qualification for this work. Their training in the hospitals, their accuracy in detecting disease, in knowing the difference between clean and unclean conditions, seemed to make them more desirable. I believe that as an actual fact not many nurses have been found who considered themselves fitted for the work; perhaps that is one subject that may be discussed a little later on as to the further preparation of the nurse for the social and civic service.

MISS NUTTINS.—Will Mrs. von Wagner let us know if she gave herself any special preparation for her work in the tenements? Is it necessary to study hygiene and sanitation?

MRS. VON WAGNER.—I would have liked that very much. There was no place to go to eight years ago, and I was called upon so suddenly to become an inspector of tenements, that I had to do the best I could. I had some very good text-books on practical plumbing sent to me, and I went to a sanitary expert in New York and had some talks with him, and that really was all the preparation I could have, because I had to begin my work right away; then I kept in touch with the latest publications, and that was all my education on sanitation. I think now that any nurse who desires to become a sanitary inspector can fit herself a great deal better. That is why I am anxious to have the nurses take it up. There are doctors in New York City who will give lectures and instructions, and then you can go to places where that work is established and learn from the experience of the workers. In New York the women inspectors had to prepare themselves in such a way and pass a civil-service examination. Don't be

abroad of the civil-service examination; all you have to look up is your arithmetic, and with your preliminary training you will pass very well; it is not so curious a problem, and even if you never become sanitary inspectors the study of sanitation will help you. May I just say that women inspectors in New York are doing Board of Health work; they inspect the house on the same lines, and are, under no consideration, to speak with or have any dealings with the tenant; they leave the people altogether out of their work; it is simply reporting nuisances and reporting the condition of the house. I would not do that. The members of the Board of Health have been very kind in Yonkers. I have done the work according to my own ideas and according to the needs of the people. I never thought I could do what they have let me do, but they have never disturbed me in any way.

MISS PALMER.—I would like to ask Mrs. von Wagner if the fault is with the women or with the department.

Mrs. von WAGNER.—The fault is not with the women; it is with the department; the women are forbidden to speak to the tenants; they just attend to their work of looking over the condition of the house and reporting it. Fifteen other cities have taken up the work since Yonkers commenced it. We have written to most of the cities in the United States asking if they have sanitary inspectors simply to arouse their interests, I think, and most of them answered No. But fifteen other cities have taken up the work, and where there have been women physicians employed as inspectors I am sorry to say they have been a failure. I think that work belongs to nurses in preference to physicians; they are a little more practical and do not mind the hardships. A woman physician is not always willing to devote her time to that; the work is so hard and takes up so much time one has to simply give one's life to it. I know of several instances where it has been a complete failure, having been undertaken by women physicians who had no interest in it.

MISS WALD.—This seems to lead logically to a message that was entrusted to me and which I must confess I had almost forgotten. In New York and Boston and Chicago schools of philanthropy have been established. The one in Boston is under the combined auspices of Simmons and Harvard Colleges; in New York the Charity Organization Society is in control of the school and two sessions are offered to the public, one summer course and one winter course. The secretary of the Charity Organization Society of New York and the recently appointed occupant of the new chair in Columbia College, that of social work, very strongly desires that those nurses who wish to supplement their training by preparation for social work may attend these lectures, and he will arrange the courses to suit such pupils, giving them just what they need along these special lines. If there are a sufficient number of nurses to justify him in having a course specially arranged for them, he will be most glad to do so; even the course now arranged by the school is admirably adapted to those who wish to take up what for lack of a better name we must call the more special work of a nurse,—the visiting nurse, the school nurse, the charity workers, and the various fields that have been discussed or alluded to in to-day's programme. Besides that, there is the course at Teachers College which is under the direction of the superintendents and which, in fact, has led to a wider conception of the social opportunities of the nurse. The Boston School, to those who are near, must offer a great many opportunities for special training. I give this message with a great deal of pleasure, for it seems to me that the horizon is widening.

and widening in that not only the nurse herself desires to take such part in the efforts for social betterment and social welfare, but that also the community desires and sometimes almost clamors for her. It is not necessary to make any formal application, but I am sure that the secretary will be glad to send the prospectus to those wishing it. This course has from time to time been touched upon in *THE AMERICAN JOURNAL OF NURSING*, but with any evidence of a desire to hear in detail of it I doubt not that all the information will be given in the fullest manner. After all questions to Mrs. von Wagner have ceased, I should like very much to ask the next speaker of the evening to present her paper. This again is on the lines that we have been following all day, that is, "The Relation of Nursing to Social and Philanthropic Work," Miss M. E. Smith.

THE RELATION OF NURSING TO SOCIAL AND PHILANTHROPIC WORK

By MISS M. E. SMITH

Late Visiting Nurses' Association, Detroit, Mich.

"In taking up the subject which now challenges our consideration I shall not attempt to give any scientific definition or outline of social and philanthropic effort. It will be sufficient if we note some of the salient points connected with it, our purpose being to gain such a knowledge as shall clearly show the relation of nursing to this work.

"The work itself is as old as the human race, and its needs as varied. To successfully carry it on, the integrity of the family must be maintained, right relations must be established between rich and poor, and the responsibilities of the prosperous must be conscientiously assumed by them. It finds its best expression in charity *strengthened by justice*—charity *without justice* is as ineffective towards the betterment of mankind as a poultice would be applied to a wooden leg—would that it were as harmless! Charity *without justice* well merits the rebuke contained in the French epigram, 'Charity creates one-half of the misery she relieves, but cannot relieve one-half of the misery she creates,' and the sting is in the truth it expresses.

"It has been said that social questions are expressions of moral energy, and that the effectiveness of social and philanthropic effort lies in the scope of its sympathy, the dimensions of its giving, and its recognition of fellowship with lives hitherto ignored or rejected by the world. I will add that it also lies in the tendency of the current day towards associated effort for the carrying on of practical and specific benevolent work, and perhaps most of all in the love and hope, the courage and patience, the sympathy and wisdom, of those actively engaged in it, and who every day breathe into it new vigor and greater freedom.

"Thus far three things appear clear to us:

- "1. The real existence of the work.
 - "2. The need of organized effort to carry it on.
 - "3. The need of individual effort whereby it may be quickened into true life in the noble hosts of the poor.
- "Consolidation for the provision of the means and methods necessary for the carrying on of the work.
- "Individualization for the actual elevation and redemption of the poor, especially those who are in sickness and distress.

"What have we as nurses to offer towards the carrying on of such work? Much! And the intrinsic value of which is only beginning to be recognized and appreciated.

"Philanthropic effort to-day calls for personal devotion and demands self-discipline, wisdom, and training. Anyone who is at all in touch with district nursing will readily admit that the nurses take all these qualities into their work—the work that takes them into the homes of the honest mechanic, into the living places (or rather, I should say, into the existing places) of the respectable and worthy poor, and even into the haunts of the paupers, the slave of poverty, if not the actual prey of licentiousness and intemperance. Through their ministrations in countless numbers of cases the integrity of the home is maintained and practical lessons in the value of sunlight, fresh air, and water are given that will prove to be more powerful remedial and preventive agents than any amount of medicine, either judiciously or injudiciously prescribed. They never lose sight of the fact that, all other things being equal, fresh air, sunshine, and water are among the most powerful forces we can pit against that grim couple—Disease and Dirt. When we add to that their sympathetic and skilled care of those sick and in trouble, and their almost unlimited tact displayed many times under circumstances trying in the extreme, then shall we begin to realize that nurses are a power in this particular phase of social and philanthropic effort.

"Their work will be found to be especially effective in the fight with tuberculosis. After the State has done all it can or will do towards the establishment of special sanatoria for the care of consumptives, after the municipality has established special hospitals and free dispensaries for similar purposes, after continuous distribution of free literature giving simple and explicit directions for the care of those thus afflicted, the dread disease will still be found in our midst, and the truth will sooner or later force itself upon us that, in the end, the monster must be fought and conquered in the homes of the poor. That is now his stronghold and will eventually be his final lair. Unless we can dislodge him thence, we can never be safe from him. Insufficient and improper food, impure air, hard toil, and close confinement are his strongest allies.

In the hand-to-hand conflict that must come (and the sooner the better) none will do more effective work than the district nurses. They thoroughly understand the conditions of these homes, and have won for themselves through their own untiring efforts that love and confidence of the people which will insure obedience to instructions given by them. Their personal influence and constant contact with the people will be to them an arm of strength that must be reckoned with in the coming struggle.

"Then too there is a great field for nurses' work in the public schools. Perhaps there has been no more impressive fact brought to light in the management of the Japanese forces in the great war now being waged than the way in which they have prevented disease in the rank and file of their men. Prevention of disease is surely more glorious than the healing of it. We in America cannot afford to let that object lesson go unheeded. In our schools is an army greater than those on the fields of Manchuria or floating on far eastern waters. They represent the future strength or weakness of this nation. Among them are communicable diseases that can be prevented; care for slight ailments can be given during school hours, thus preventing loss of time to the pupils, and proper personal and hygienic instruction imparted to children approaching and of the age of adolescence. This is all of infinite importance to the children and through them to the future of the people. It is essentially nurses' work. The good accomplished in the home will be strengthened by the instruction given in the schools, and vice-versa. Too much emphasis cannot be given to the importance of this work in the schools.

"So much for the *Individualization* that makes for the actual elevation and redemption of the poor, and the part the nurse must take in it in times of sickness and of health.

"We will now consider her part in the *Consolidation*, that makes for the provision of the means and methods necessary for the carrying on of the work.

"Consolidation is for the most part represented by charity organizations,—charity spelled with a small c,—and these are managed by Executive Boards—I take the ground that a well-balanced board should be composite in character. There should be on it those who understand the practical management of its finances, those who are competent to deal with the ethical problems that present themselves, and those who can intelligently and authoritatively interpret to the management the duties and the needs of the nurses employed in the work. For this last duty, all other things being equal, none are so well qualified as trained nurses,—particularly those who are not engaged in district nursing,—the

reason for which you will find in what follows; with such representation upon the board, the nurses engaged in the practical work will always be sure of a sympathetic and professional understanding of their efforts by the management. Nor will this influence and understanding be confined to the members of the board only. Owing to the nature of the work engaged in by many of them, they have frequent opportunities of discussing the subject with people of means and power, people who only have to be shown the value of the work in order to secure from them their hearty coöperation and support. Taking this into consideration, it would be impossible to estimate the value of their work and influence, it is so rational, so far reaching, and so constant. It is a matter of the greatest surprise to me that such Executive Boards do not eagerly seek for members from among this class of workers. But such, I am told, is not the case—in fact, the opposite is true. Speaking of the work I know the best, that of 'The Visiting Nurses' Association of Detroit,' it is with pleasure and profound satisfaction that I tell you it is an exception to this rule—a rule and practice that, I trust, may soon become obsolete. From the time of its organization, seven years ago, until now it has always had professional nurses on its Executive Board. In their last annual report, just issued, official recognition and commendation of the value of the services rendered by these women appear as follows: It speaks of the work of the various standing committees, and of the House Committee it says in part, 'The duties of this committee require time and attention that are not adequately represented in their brief and informal reports, and their work illustrates the dependence of the board upon the good sense and fidelity of its members.' Then comes the following: 'Another exponent of this kind of service is the Committee on Nurses' Work, with Mrs. L. E. Gretter as chairman. The report given at the monthly meeting may be the briefest, but it stands for entire familiarity with the practical work of the preceding four weeks. Emergencies have been met, substitutes provided, necessary medical supplies obtained through proper sources, charts received and inspected, and needed advice and encouragement given. In the absence of a paid superintendent the board should understand and recognize how much is due to the devoted service of this committee, and especially to its chairman. The value of having professional nurses as members of the active board is here apparent, and it should be noted that the Detroit Association is unique in this respect.' In the special report of auxiliary work, given in this same annual report, the work of the Farrand Training-School Alumnae Association is thus described:

"Among these auxiliaries is the Farrand Training-School Alumnae Association, which has been represented from the first on this Execu-

tive Board by a delegate annually elected by the alumnae of the Training-School and by their honorary president, Mrs. L. E. Grotter, principal of the Farrand Training-School, elected from the membership at large of this association. Since the beginning of this united work these two women have served continuously on the Nurses' Committee, and for three years the delegate from the Alumnae Association acted as secretary of this body. During a part of the time other members of the Executive Board have served on the Nurses' Committee with them, and the remainder of the time they have served alone. This committee has had charge of all matters pertaining to the nurses and to the nursing department. At their suggestion the different nurses of the staff have been sent, after a year's service, to other cities for field work and observation of all methods pertaining to district nursing. The first to be sent was Miss Sutherland, who went to the Nursing Settlement, New York City. The expenses of this trip were in part met by the personal contributions and money collected by the efforts of this auxiliary. The following year Miss Jeanette Smith was sent to Chicago for a month, and almost the entire expense that time was met by this auxiliary. A year later Miss Aylesworth was sent to Boston, and this time the entire expenses were met by this auxiliary, together with quite a sum over, which they allowed to be used towards furnishing uniforms for the nurses. In addition to this they have annually contributed a sum ranging from twenty-five dollars to fifty dollars and usually it has been the latter amount.

"Thus it will be seen that nurses have a part to perform, not only in the actual district nursing, but upon the Executive Boards, and in diffusing a correct knowledge of the work, its needs and importance, among the prosperous people whom they meet. In all these different ways nurses may lend their professional training to the furtherance of social and philanthropic effort, and an influence be wielded for good that shall be great beyond all computation. Let me illustrate the power of this influence. In the *individual* it may be compared to the tiny blade in a turbine engine, a blade no larger than a lady's little finger, small indeed—in the *aggregate* it far transcends the combined power represented in the innumerable blades in the engines of one of the grey-hounds of the ocean. As in the turbine, there are the 'fixed' blades—those engaged in the practical work; and there are the 'moving' blades—those who lend their influence to the furtherance of the work, whether on Executive Boards or among the rich and prosperous. The 'fixed' blades act as guides to deliver the steam with proper direction and velocity against the 'moving' blades. Thus the full power of the steam is utilized and in a direct and continuous way. Through the temper and wisdom gained by our training we, as nurses, may become

a mighty social dynamic, full of potential worth. In all this varied activity it is their quality as nurses that is of value and importance. They are as essential to that part of the work that guides and directs these efforts as they are to the field work. To alleviate without removing the cause will but prove an anæsthetic to the poor, only keeping them from realizing their condition.

"To cabin, crib, confine such a power as is ours is a responsibility we have no wish to assume, and, I believe, one that associated workers in social and philanthropic effort dare not.

"The Present Time—youngest born of Eternity, child and heir of all Past Times, with their good and evil, and parent of all the Future—is ever a new Era to the thinking man. To know it, and what it bids us do, is ever the sum of knowledge for all of us."

MISS WALD.—Our programme for the day closes with some further discussion, and perhaps some slight elaboration on the excellent suggestions in Miss Smith's paper. The nurses in the training-schools, however much we may estimate and value the training that they have received, lack the knowledge of what other people are doing. I think that some of the training-schools are aware of that and are trying to supplement training and further prepare the pupils under their charge; the hospital on Blackwell's Island is such a one. I understand there is a representative here from that hospital, and will she please tell us what is being done in her hospital for this further social preparation.

MISS FURNESS.—I am very much pleased to have an opportunity to speak to you about the work in the Tuberculosis Infirmary on Blackwell's Island. This infirmary was opened in the early part of the year 1902. At that time the buildings at the north end of the island that had been occupied by the insane were vacated and through the Commissioner, Hon. Homer Folke, gradually put in thorough repair and occupied by the consumptives.

In reference to the nursing at that time, it was done by the pupils in the Training-School, but when you consider that we had then about ninety cases, and now have over five hundred as an average, you will readily understand that it soon became rather a problem for us as to how we were to care for the increased number of patients. In October, 1903, we investigated the question by writing to about forty institutions and asking for their methods, also inquiring as to the salaries paid; we heard from about twenty-six. It was rather interesting and encouraging to note that one institution had been given up as a sanatorium for consumptives and was then being used as a hotel. We found the graduate nurses were holding supervising positions which paid about fifty dollars per month; nurses under them, or assistants, were paid from twenty to thirty dollars per month. In some of the institutions they had attendants, some of whom had been patients in the institutions; they were on salary, of course, but lower, usually, we found, not under eighteen dollars. Those who were interested in our institution were very anxious to have the nursing done by the pupils, but owing to the information received, and the fact that we required the pupils for another wing in the hospital, opened for a male medical service, it was decided to employ graduate or experienced nurses for the infirmary at twenty-five dollars per month. The plan has been very satisfactory, but in

order to interest more graduates in the work, we are considering an increase in the salaries, and inaugurating a course of lectures along sociological lines. We should be very much pleased to have the opinion of some of those present.

MISS WALD.—I do not know whether there has been enough experience in that respect, but perhaps Miss Nutting will tell you something of the lecture course which she has introduced into the training at Johns Hopkins Training-School.

MISS NUTTING.—I presume you mean the short course of lectures which has been given to the senior class each year on subjects about which we think it important that all nurses should have some knowledge, particularly those who do district nursing. While I have not yet been able to make this course of lectures just what I would like, no year has passed for the last seven years when we have not been fortunate enough to secure the aid of the various men and women representing some forms of philanthropy, charitable, or social work. Each year, for instance, we have had lectures from the general secretary of the Charity Organization Society, from those in charge of institutions devoted to child-saving effort, from probation officers in connection with the Juvenile Court, and from settlement workers. We have had that good Samaritan, Mrs. von Wagner, and Miss Wald, and even on one occasion we were fortunate enough to get Miss Addams, of Hull House, Chicago. There is, in fact, no form of active social work existing in Baltimore of which we have not tried to inform our nurses so that they may understand their relationship to such bodies of workers when they begin work outside the Training-School. This last year we made a slight change and arranged for a series of classes covering the ground included in most of these subjects, and placed the whole series in the hands of Mrs. John Glenn, whom you all know. She herself arranged the schedule of work, and this regular course of study, covering a period of six weeks, was systematically provided.

I do not know that there is anything more to add, but feel sure that there are other schools which have been able to do probably more than we have in this direction.

MISS WALD.—I think Miss Damer has had a better opportunity for comparison than many others have, and I think if she is willing we would be glad to hear a word or two from her as to the relation of the nurse to other sociological and philanthropic work.

MISS DAMER.—It is getting very late, but I would like to say that I do realize the importance of the nurse's relationship to all lines of philanthropic work. A nurse has an experience that no other worker has. Miss Jane Addams says that district nursing is one of the most popular charities, ministering as it does to obvious needs without investigation, and charity workers often say to the district nurse, "You have opportunities of knowing the families and coming in touch with their real life and experiences that no other worker has; they will talk over things with you that they will not with us, for they look upon us only as investigators. They know the nurse comes to do something, and she is established on a friendly footing at once, as a real friend to the family." It is interesting, as our experience grows, to notice the growing esteem of other workers and the value placed upon the nurse's knowledge and experience in the broad, wide lines of philanthropic work, not only in her actual dealing with the family, but in general social and preventive work, especially in the efforts made for the amelioration of the condition of women and children in industrial life, laboring in our stores and factories.

Only the other day Mrs. Florence Kelly, of the National Child Labor Committee, speaking to our district nurses in New York, said, "You nurses can do more than you realize, you have such a power from your knowledge in speaking to people, and you can do so much more than anyone else can." It is so pleasing to know that our nurses are waking up to that fact. We have for such a long time devoted ourselves to the actual technical work. We are broadening ourselves now, and everything that will tend to be of help to us should be encouraged, such as lecture courses. As Miss Pindell said in speaking of tuberculosis, I find also in district nursing it is a little difficult to get nurses to devote themselves to that work entirely, so that opportunities should be given them of making the work more attractive and helpful in the early days of these experiments we are undertaking.

At a request from the floor Miss Wald gave an interesting sketch of the Nursing Settlement from its foundation to the present day, and at the conclusion said: "Now, with a great many thanks for the courtesy and attention that the papers have received all day, and with a great deal of appreciation of the honor that it has been to me to preside over these papers, the formal programme of the evening will be considered closed and I will turn the chair over to Miss Riddle.

Miss Nevins proposed a rising vote of thanks for Miss Wald and the other speakers of the evening, which was most heartily given.

MISS CARR.—I fail to see, Madam President, why it is so difficult to persuade nurses to take up this work, since the interest we all feel is so great.

—>Miss Goodrich thought the superintendents at fault. <—

PRESIDENT.—We will try to do better in the future. And now I am sure that I express the sentiment of the convention here assembled when I say that we cannot be too grateful to Miss Wald for the great interest she has shown in taking charge of and conducting this programme and the interest she has brought out from every member present. As I understand it, we are to convene to-morrow morning in the hall where we assembled this morning and continue with our business. We have but one session to-morrow, and as we have considerable to do it will be very necessary to begin promptly. If there is no further business or no questions, we will adjourn.

The meeting is adjourned to meet to-morrow (Friday, May 5).

Friday, May 5, 1905.

Meeting called to order at ten o'clock.

PRESIDENT.—The hour has arrived when we should continue our meeting, and we will open this morning's session with the roll-call.

Roll-call by the secretary.

PRESIDENT.—We have next in order the reports from several committees and we will first hear from the committee appointed last upon the ways and means for securing the ownership of the JOURNAL. I will call upon the chairman of that committee, Miss Damer, to make the report.

MISS DAMER.—The committee appointed last year when we met decided that they would begin their work by writing to the associations that were not already owners of stock in the JOURNAL, with the idea that they might possibly be induced to buy some shares, and we did so by writing to forty-three societies, with the result that during the year eighteen shares of stock have been taken by societies.

So you see that there are very few shares remaining unsold; there have

been demands for these shares from individuals, but the directors had decided that for one year they should be held open to the alumni associations, and the committee felt it advisable to go on in the same way that we have been doing in order that the remainder of the shares may be taken by the alumni associations. At present forty-three shares of the one hundred are held by the alumni associations, and one share belongs to the national society. We hoped in this way to secure the controlling interest in the JOURNAL, and eventually that all the shares will be held by our societies, and it seems the easiest and simplest way to accomplish that without demanding that the national association should raise a large sum of money. Later on we hope that the societies will transfer as they can, either by selling or by giving their shares to the national association to be held by us and not individually, but we feel that from the general interest that is being taken in the JOURNAL that it is our own magazine and belongs to us altogether, and that we must all do our share in interesting others and in making it a success, and the committee has nothing further to suggest to you, unless the suggestions come from the members, than that we should go on in the same way until we can gain possession of the JOURNAL. I think possibly there may be one or two shares taken very soon, but up to date we have just sold the eighteen for the year, which I think is quite a gain.

MISS McISAAC.—I would like to say just one thing that may be of interest to the nurses, and that is that while there are only ten shares remaining, that there are a number of associations that are not stockholders, and that there are a number of individual shareholders who hold more than one share, and these individual shareholders have signified their willingness to sell their shares at any time to any society after the said ten shares are disposed of—that is, the unsold shares. I say this because we often have inquiries from the different associations saying that they have heard from some quarter that there were no more shares, and many individual shareholders would be willing to sell, not to other individuals, but to the alumni associations. I think the balance of power in the stockholders now is pretty nearly in their own hands, and it will belong largely to the associations if a few more shares are sold. We all feel that an interest has been taken, and we hope that it will not be very many years before the JOURNAL actually does belong to the Associated Alumni.

PRESIDENT.—The directors voted at their last meeting to give the alumni associations opportunities for purchasing shares for one year after the expiration of that time.

On motion of Miss Haley, seconded by Miss Rhodes, the report was accepted.

PRESIDENT.—Possibly there may be some other questions concerning the JOURNAL or something that someone may have to propose in the interest of the JOURNAL at this time.

MISS DAVIS.—I should like to make a motion that this society itself purchase two shares. I think you will all remember that we have a good deal of money in the treasury, and I make a motion that we purchase two shares for a beginning.

Motion seconded by Miss Emly and carried.

MISS NOTTING.—If it is in order, I would like to present a motion to this assembly. There are nearly one hundred alumni associations represented, and I feel quite sure that not one of these alumni associations would object to placing ten dollars during the coming year in the Associated Alumni treasury. If each delegate would go home and ask her alumni to do this, I feel that not

one would refuse, and I would like to move, therefore, that these delegates be asked to return to their individual associations and ask them to contribute ten dollars to the Associated Alumnae for the purpose of purchasing the JOURNAL.

Seconded by Miss Smith and carried.

Miss PALMER.—I just want to say one word in regard to a little change we are going to make in the monthly routine of the JOURNAL business. It has been the custom since the JOURNAL was organized for the secretary of the Associated Alumnae to have charge of the official department—that is, to receive and to prepare all of the official reports that come in from the organizations all over the country. Now when we began we had comparatively few organizations, but the work has gotten absolutely unreasonable, and it has been decided by the directors recently that beginning with this year in the change of the secretaryship, all of the official reports shall be sent directly to the editor's office in Rochester, and I wish you would save a great deal of trouble and confusion during the next few months by taking that message home to the secretaries of your associations. Tell them not to send them to Miss Thornton, but to the editor directly, in Rochester; they will be taken care of there and acknowledged when necessary. Miss Thornton's work in this respect has been constant and untiring and has been done under great stress of other duties, and I make my personal acknowledgments for that service.

Miss WHITAKER.—The Committee on Arrangements in Philadelphia after settling up its affairs has some money left from the proceeds of the advertisements in the programme. The committee has decided that the most fitting disposition to make of this money is to give it to the Associated Alumnae. Therefore, as chairman of that committee, I take great pleasure in presenting to the Associated Alumnae one hundred dollars in gold to be used for the purchase of one share of stock in THE AMERICAN JOURNAL OF NURSING. [Applause.]

PREIDENT.—I am sure on behalf of the Associated Alumnae I can say nothing in the way of an expression of gratitude that equals your demonstration, and nothing more seems to be required. I only hope other Committees on Arrangements will emulate this conduct and be as economical and have their affairs as well managed as was our convention in Philadelphia last year. I will pass this to the treasurer.

Miss CASEY.—I should like to inquire whether alumnae associations which are not members of the national association may invest in the stock.

PREIDENT.—I think the better way would be to join the Associated Alumnae, and then you could surely be a purchaser. I could not insure that you could be a purchaser otherwise, because that is a question that would have to be decided by the Board of Directors managing the JOURNAL stock.

If there is nothing further to be said upon the subject of the JOURNAL, we would like to pass on to the next item of business and call for the report of the committee on the resolution which was offered yesterday.

Miss NEVINS.—You will remember that yesterday morning the resolution on a special commission on housing conditions in the National Capitol, which was asked for by the President of the United States, was brought up before this association. Miss Wald was made temporary chairman. There was a meeting last night and I was appointed the chairman of that committee for the reason that I live in Washington, and I want to explain it to you. As you know, anything we get in Washington has to come through the two houses of Congress, and in order to have anything in the way of efforts towards benefiting the public health or housing, tenements or anything at all in the city of Wash-

ington, it must come through both houses of Congress. One of the difficulties, perhaps, that we have had through our registration bill is because of the larger body and the less attention that naturally would be given certain things which are to them of so much less importance. What we ask is that when this committee is organized here in Washington, and when you receive communications, as you will do, what we ask for is your support and cooperation towards that end.

PRESIDENT.—You have heard the report of that committee and the excellent advice therein contained. We will next call for the report of the Programme Committee.

MISS NORTON.—The chairman of the Programme Committee reports that it was found impossible to obtain even one meeting of the Programme Committee, and the work of planning for the convention had to be carried on almost entirely by correspondence and by frequent conferences with Miss Novins, the chairman of the Committee on Arrangements, to whom many of the details were left entirely. It was decided to devote at least one day of the convention to the consideration of a special subject, placing the chairmanship of that day in the hands of an expert in that particular subject. "District and Visiting Nursing" was selected, and we were fortunate in obtaining Miss Wald's consent to act as chairman for that day. It was also decided not to limit the papers necessarily to members of the alumni, but to try to secure the aid of those of prominence in certain forms of nursing work, whether members or not. The work of the committee has been greatly facilitated by the prompt and hearty responses which have come to its appeals for papers, discussions, etc., and wishes to take this opportunity of thanking them.

PRESIDENT.—We have been accepting the work of this Programme Committee for the last two days; therefore we will have no more formal acceptance of it; we cannot do better than follow the outlines they have presented to us. We have before us now the report of the Education Committee, which was prepared and presented in the absence of the chairman by another member of the committee, Miss Tippet.

The secretary read the report of the Committee on Education.

"MADAM PRESIDENT AND MEMBERS OF THE ASSOCIATED ALUMNI: Your Committee on Condensing Reports has much pleasure in reporting decided progress, evident in the more than sixty reports from the various local associations received. In most there is an increase in numbers and marked interest in the questions and movements of the day in our profession. We note especially the nurse in the public schools, the crusade against tuberculosis, State registration, and wider and higher education. There is still the question of how to bring skilled nursing to the people of moderate means, 'our own class,' as our president has so rightly called it, and the call for classes in the study of parliamentary law. Among the suggestions of work for the coming year come the questions of how to prevent the establishment of inefficient and, if we may be allowed to use the word, 'began' schools of nursing, also that a course of instruction calculated to keep graduates in practical knowledge of new methods and new medicines be arranged. Your committee would urge, from its own and experience, a practical course in business methods, laying special stress upon writing reports, for although pains were taken to simplify everything as much as possible by preparing and sending out blanks with plain questions to be answered, many were returned with neither the name of the alumni nor the signature of the secretary, thus making the answers valueless. We regret that many of the reports were received so late that we cannot present them in tabulated form, as we wished, but we shall be glad to prepare them for the printer and so present them later.

—Respectfully submitted,

—ALICE G. TAYLOR,

"For the Committee."

Alumnae Association.	#	1	2	3	4	5	6	7	8	9	10	11	12	Meetings.	Work accomplished.
Methodist Episcopal, Hart- ford, Conn. Presbyterian Hospital, Philadelphia, Pa.	57	10	2	.....										Four—business and social.	Nurses' Benefit Association organized.
Hospital of the Good Shepherd, New York, N. Y.	126	5	.....											Monthly—six business, six educational and social. Educational included (a) five classes in parliamentary law, (b) One—The History of THE AMERICAN JOURNAL OF NURSING. (Miss Palmer.)	Reception to graduating class. Reception to Miss Palmer. Four children in India supported. One hundred dollars given to congregation of James F. Magee Memorial Chapel, Philadelphia.
St. Vincent Hospital, N. Y. C.	60	5	.....	2										Twelve—two special. All combined business with social and educational purposes.	Papers read on current topics. News of the nursing world, its progress, etc.
St. Vincent Hospital, N. Y. C.	125	5	.....	1	1									Five—eight regular, one special. Also five directors' meetings. All combined business with educational and social purposes.	Reception to State Association. Tenth anniversary of Alumnae Association celebrated by party. Papers of interest read at annual meetings. Refreshments served.
Palmer Hospital, New York, N. Y.	25	.....	2	1	15									Five—three regular, two special.	District nursing started. Each nurse pledged to do certain amount charity work during year.
St. Joseph's Hospital, New York, N. Y.	254	10	.....	2	0	0								Eight—four business and social purposes.	Club house, accommodating over a hundred members, established.
St. Joseph's Hospital, New York, N. Y.	15	.....	1	1	.....									Two.	Establishing a fund for sick nurses.
Brooklyn Hospital, Brooklyn, N. Y.	60	.....	1	1	.....									Four business and one social meeting.	.....
Western Pennsylvania Hospital, Pittsburgh, Pa.	70	.....	1	.....										Five meetings—for business, educational, and social purposes.	Lectures given on current events and parliamentary law. Dance and boat excursion once a year.
Baltimore City Hospital, Baltimore, Md.	15	.....	0	.....										Four meetings—for business, educational, and social purposes.	One share of stock taken in THE AMERICAN JOURNAL OF NURSING.
Columbia and Children's Hospital, Washington, D. C.	25	.....	0	1	.....	4								Monthly meeting—for business, educational, and social purposes.	Two sick benefits paid during year.
Johns Hopkins Hospital, Baltimore, Md.	220	.....	1	.....										Four—business, educational, social, and philanthropic.	Addresses given at each meeting by some authority on educational or philanthropic lines. Association acted in conjunction with Committee on Nursing, Maryland Society, for prevention of tuberculosis. State Registration of Nurses. Volunteer Army Association for Relief of France. Aid to members of Canadian in Canadian Corps. Forfeiture of members share of stock in AMERICAN JOURNAL OF NURSING. Gifts to foreign correspondents of AMERICAN JOURNAL OF NURSING. Continued publication of the Johns Hopkins Alumnae Journal. Increase of nurses' library at Nurses' Club-house. Reception given to graduating class. Working to enlarge nurses' room.
Methodist Episcopal Hospital, Richmond, Va.	57	.....	1	.....										Two—business and social.	
St. Luke's Hospital, Richmond, Va.	55	.....	0	.....	0									One—business meeting.	Improvements made each year in the Nurses' Home of the Training-School. Fund raised that sick nurses may call on.

Alumni Associations	Membership	Men	Women	Children	Meetings	Work accomplished
St. Joseph's Hospital, Chicago, Ill.	20	4	10	2	Two—three business, six educational, one social.	A course in parliamentary drill given. Monthly meetings held at the different nurses' homes for literary and social purposes.
Michael Ream, Chicago, Ill.	37	0	20	2	Two—business and social.	Help given to sick members.
Pittsburg Training School, Pittsburg, Pa.	65	0	0	0	Ten meetings—monthly, except July and August, for business and social purposes.	
Jewish Hospital, Philadelphia, Pa.	20	2	0	0	Two—ten business, two social.	Working for an endowed room. Seventy-five dollars has been paid to sick members from the general fund of the association. Trying to help graduates of hospital (not a member of the alumni) ill with tuberculosis in Colorado.
House of Mercy, Pittsfield.	64	5	0	0	Four—business, educational, and social.	Lectures given on educational matters. Nurses have made one thousand three hundred and fifty charitable calls on the sick at Pittsfield.
Newton Hospital, Worcester City Hospital, Worcester, Mass.	20	4	1	0	Two—business, educational, and social.	
Worcester City Hospital, Worcester, Mass.	20	10	5	0	Six meetings—five business, one social.	A sick benefit association started, for giving friendly and pecuniary assistance to sickness and death.
Boston and Massachusetts General Hospital.	215	19	1	1	Eight meetings—for business and social purposes.	Efforts being made to raise sick fund. Addresses given to graduates (not a member of the alumni) in dormitory.
Virginia Hospital, Richmond, Va.	40	7	2	1	Monthly meetings—(quorum 6 times) for business and social purposes.	Lecture course begun.
Salem Hospital, Mass.	20	6	2	0	Seventeen—ten educational, one social, six business.	The study of Shakespeare's plays, "Hamlet," "Macbeth of Venice," "As You Like It," "Macbeth."
Ferrand Training-School, Detroit, Mich.	215	19	0	0	Eight—business and educational.	Educational papers on "Hospital Economics" written. Contributions in money and work to "Visiting Nurse Association" of the city. A year's course in parliamentary law practice given by competent instructor.
Rochester City Hospital, Rochester, N. Y.	20	10	20	0	Four—business.	
Toledo Hospital, Toledo, Ohio.	20	4	2	0	Twelve—ten educational, two social.	Nine lectures delivered and papers read on educational subjects. Attendance at meetings better. Organization of a City Association accomplished.
New York Post-Graduate Hospital, New York.	120	15	1	0	Seven—business meetings.	
Reservoir Hospital, New York.	60	15	2	0	Eight—business.	
St. Luke's Hospital, New Bedford, Mass.	20	2	0	0	Seven—business, educational, and social meetings.	
Allegheny General Hospital, Pa.	20	0	0	0	Twelve—business and social meetings.	A dance given by Class of 1910, and best answered by the association, proceeds of both given towards endowing a room for sick women in new hospital.
Methodist Episcopal Hospital, Pa.	60	9	1	0	Nine—business, one social.	Working for endowment of room for nurses in hospital.
St. Luke's Hospital, St. Paul, Minn.	67	4	1	0	Three—business.	Hospital care to six nurses through Sick Benefit Fund.
Old Dominion Hospital, Richmond, Va.	20	2	1	0	Five—three business and two social.	One member has charge of Domestic Training School, two classes open in city district work, established in Louisa, Va.

Alumnae Association	Members	Active	Life	Transfer	Meetings	Work accomplished
Orange Memorial Hospital, Orange, N. J.	110	8	1	1	Four—three business and social, one annual. Lectures given at regular meetings after transaction of business, followed by refreshments and social hour.	Reception and tea given to graduating class. Nellie E. F. Nurse employed to take charge of the anti-tubercular work in the Orange. Representative delegate at all meetings of the anti-tubercular movement.
Boston City Hospital, Boston, Mass.	221	21			Six meetings—one business and social, one social, four executive.	.....
Augustana Hospital, Chicago, Ill.	50	10	4		Monthly—social and business.	Established monthly paper. Furnished room in new addition to hospital.
University of Michigan, Ann Arbor, Conn.	65	1	2		Six—business and social.	Study of ethics of nursing begun.
Connecticut Training School	64	7	1		Two—business and social.	Working for nurses' home and State registration. Entertained State Association in November. Ten dollars sent to Ellen Robertson Fund. Several members responded to request for donation towards fund for endowing the course in Hospital Economics at Teachers College.
Elm County Hospital, Elmhurst, N. Y.	20	15	2	3	Twelve—ten business two social.	Incorporation of the Training School.
Union Free Hospital, Baltimore, Md.	25	2			Eight—principally for business.	.....
Providence Hospital, Chicago, Ill.	20	6			2 Monthly—educational and social.	Course of lectures given during winter.
Protestant Episcopal Hospital, Philadelphia, Pa.	120	25	1		Thirteen—for educational, social, and business purposes.	Course of talks on parliamentary law given. Some members doing district work.
Maryland Homeopathic Hospital, Baltimore, Md.	17	2			Six—business and social.	Increase of good feeling among members. Benefit paid to sick nurses. Graduating class entertained.
Allice Baker, Philadelphia, Pa.	140	25	1	2	Two—eight business, one social, one educational. (Lecture by the president of the Consumers' League.)	Two shares in THE AMERICAN JOURNAL OF NURSING purchased. Social teas held after each business meeting.
Presbyterian Hospital, N. Y.	120	8	1		Monthly—business and social.	Members have attended lectures on parliamentary law, current topics, medicine, and surgery.
Elm County Hospital, Grechlyn, N. Y.	50	14	1		Five—business.	.....
St. Luke's, Chicago, Ill.	120	25	4		Twenty-eight—fourteen business, seven educational, seven social.	Monthly Alumnae Journal published, containing items of interest, minutes of all business meetings, etc. Project under discussion for getting out special calendar, the proceeds from the sale of which are to be added to the endowment fund. Sick benefit fund.
St. Luke's Hospital, New York City.	120	25	1		Nine meetings—eight business, one social.	.....
University of Pennsylvania, Philadelphia, Pa.	120	15	1	1	Sixteen—ten business, five educational, two social.	Five lectures on parliamentary law. Donations to Italian settlement. Dance and reception given.
University of Maryland, Baltimore, Md.	60	12	2	1	Six—four business, two special.	Lectures and meetings given.

Alumni Association.	Membership.	May meeting.	June meeting.	July meeting.	August meeting.	Meetings.	Work accomplished.
Lakeside Hospital, Chicago, Ill.	34	1	1			Six—business and social.	.....
Hillside Training School, Chicago, Ill.	273	12	12			Eight—four educational, social, and business purposes.	Papers read on Central Directory and other subjects. Banquet and musical given. Lectures delivered on "Prevention of Tuberculosis."—Holland.
Hope Hospital, Fort Wayne, Ind.	25	2				Twelve—four business, educational, and social purposes.	Original papers read at meetings. Stimulus given to social life of the society.
Chicago Baptist Hospital, Chicago, Ill.	60	20	20			One—business meeting.	.....
N. E. Hospital, Roxbury.	77	0	1			Eight meetings held—business, educational, and social.	A share in club-house, and one in AMERICAN JOURNAL OF NURSING stock purchased. Lectures given and papers read by physicians and nurses. Topics discussed: "Progress in Nursing."—Hearley Harding. "Nursing."—Hearley Harding. "Nursing in Public Schools." Paper on Nursing read by hospital matrons. Each covered for sick relief fund.
Rhode Island Hospital, R.I.	165	40	2			Nine—chiefly devoted to business.	Alumni called a mass meeting of all graduate nurses in State to consider forming a State Association for purpose of obtaining State recognition, resulting in the formation of the State Association and the presentation of a bill during January, 1918. A concert was given in November the proceeds of which, two hundred and seventy dollars, was added to the Rhode Island Fund for Nurses. In a charitable way we have given financial aid to three sick nurses.
Long Island College Hospital, Brooklyn, N. Y.	120	5	15			Eleven meetings—ten regular, and one special; for educational, business, and social purposes.	Lectures given by physicians. Charity sewing done. Progressive courses held once a month, one thousand dollars raised, clearing entire debt for furnishing Central Registry.
Brooklyn Hospital, Brooklyn, N. Y.	112	2	7			Nine meetings—business and social.	Reception on Tenth Anniversary.
New York City Hospital, N. Y.	265	40	2	2		Two—business, educational, and social.	.....
The Maine General Hospital, Portland, Me.	50	6	1			Monthly—business, educational, and social.	.....
Hahnemann Hospital, Chicago, Ill.	45	6	4			Twelve—four business, four social, four educational.	.....
North Adams, Mass.	35	4	1			Eight—business, and three lectures.	Banquet given graduating class and medical staff.
Germantown Hospital, Philadelphia, Pa.	45	5	1			Eleven—business, social, and educational.	Two lectures given.
German Hospital, N. Y.	30	9	2			Nine—business and social.	.....

* Because of illness.

Miss CORNISH.—I move that the report of the Committee on Education be accepted.

Seconded by Miss Dewey and carried.

President.—I will call upon the secretary for the correspondence, and before she begins the reading of those messages that she will present to you I would like to state the message that was given to the delegates on their departure from Boston for this convention. You will remember that when we met in Boston two years ago our meeting was opened by the Rev. Edward Everett Hale, and when he learned that we were coming here he said, "Give my love to the nurses and my blessing, and tell them I am glad they are going to Washington."

Miss THOMSON.—I move that an official acknowledgment be sent to Dr. Hale for his message.

Seconded by Mrs. Bohling and carried.

The secretary read the following messages:

"DETROIT, MICH., Jan 22, 1905.

"Miss Mary E. Thornton, Secretary, The Nurses' Associated Alumnae of the United States.

"The Detroit Graduate Nurses' Association cordially invites the Nurses' Associated Alumnae of the United States to meet in Detroit in 1906.

"Yours sincerely,

"Rose Smith, Secretary.

"CHICAGO, ILL., May 4, 1905.

"Miss Mary E. Thornton, Secretary, The Nurses' Associated Alumnae of the United States in Convention at Washington, D. C.

"Greeting, best wishes for a successful meeting.

"NURSES' ALUMNAE OF ILLINOIS TRAINING-SCHOOL.

Miss Thornton said in reference to the last message that as it was sent on the first Thursday, the Illinois Alumnae was no doubt holding its meeting at that time; that a letter had come just before the convention from Mrs. Frederick Tice, the corresponding secretary of the Illinois State Association of Graduate Nurses, wishing for a happy and profitable meeting of the Associated Alumnae and expressing the hope she might have the pleasure of telegraphing before the convention was adjourned that the Illinois Nurses' bill was passed.*

"SAN FRANCISCO, April 27, 1905.

"CALIFORNIA STATE NURSES' ASSOCIATION.

"To The Nurses' Associated Alumnae, in Washington assembled.

"The California State Nurses' Association sends greetings, and desires to state that we look forward with pleasure to meeting some of our co-workers from the East and Middle West. We trust that all nurses attending the conference in Portland in July will endeavor to visit San Francisco after the close of that session. The annual meeting of this association has been postponed until late in July or early in August in order that we may have the visiting nurses with us.

"We believe that a stronger bond for mutual good will be formed by meeting in California at this time, and we sincerely request that all nurses who can come to San Francisco after the Portland meeting will do so. Accommodations will be secured at reasonable rates if due notice be sent the secretary of this association.

"We will appreciate it very much if a list of the names of the nurses who intend visiting San Francisco can be sent us by July 1, all communications to be sent to the secretary, Miss Theresa Earle McCarthy, 1105 Van Ness Avenue.

"With best wishes for the success of your work in the coming year,

"Cordially yours,

"CALIFORNIA STATE NURSES' ASSOCIATION,

"THERESA EARLE MCCARTHY, Secretary."

* The message arrived after the convention had adjourned.

PRESENTER.—It seems proper at this time to repeat Miss Weld's request of last evening to you that all help possible be given Miss Watson, who is preparing a directory. She would like the names and addresses especially of district and visiting nurses. I would like to give an opportunity at this time for those visiting delegates who have come from their State societies to ask any questions or present any report or word from their associations. This is the opportunity now for the State societies.

Mrs. FERNISS.—I should like to know if there is any way for us to find out where to apply to the different Boards of State Examiners to find out from their past experience how to take steps in Indiana. We should like to have some information to take back, and I should like to get it from the boards of the different States which already have registration.

PRESENTER.—There is a paper on Examining Boards later in the morning.

Miss BARNETT.—The graduate nurses throughout the State of Michigan met in Detroit May 10, 1904, to form the Michigan State Nurses' Association. The first annual meeting was held in Grand Rapids in March of this year. We now have a membership of over two hundred and forty. A bill for State registration was drafted and presented to the Legislature. It has passed the Senate unanimously and word has just come from Lansing that it is reported out of the House Committee and is put on the general order, to come up next week. No trouble is anticipated. As a society we have made concerted effort towards the Endowment Fund of Hospital Economics. Since March, 1903, two hundred and thirty-eight dollars and twenty-five cents has been contributed for that purpose.

Miss DAVIS.—I suppose that everyone knows that the Massachusetts State Nurses' Association is extremely complicated. Everyone knows about the troubles and sorrows of Massachusetts, and we have come here specially to-day not only to get the sympathy of the members of this meeting, but their advice and their remarks and criticisms on Massachusetts, and I hope that none will be backward in coming forward and telling us just exactly what they think of the condition there.

Mrs. HARVEY.—Madam President and co-workers, it gives me pleasure to have the privilege of briefly relating to you the progress of the Graduate Nurses' Association of Virginia during the past year.

In speaking of the law regulating our profession I can only echo the words of Miss Webb, our secretary and delegate of last year, "It has proven of interest and of great benefit to the nurses, the physicians, and to the public," and to add that we hope for an increase in the desire of the public to avail itself of the protection of this law. Registration has met with hearty support from almost all the schools of Virginia.

Immediately after the passage of the bill the faculty of one hospital held a meeting and agreed to raise the standard of the Training-School. The lecturing staffs are giving more attention to their work and small hospitals are affiliating with larger ones for lectures and classes, while others are sending their pupils away for special courses, which they are unable to give.

The first sixteen months of the existence of our law were most trying and arduous ones for the association and board. When registering nurses substantial credentials have been insisted upon, and in several cases we have been threatened with lawsuits because we have refused to register nurses presenting doubtful testimonials, but so far we have escaped, owing to the tact, good judgment, untiring energy, and patience of our president, Miss S. H. Chabouis, towards

when every nurse in Virginia should feel personal gratitude for the great good she has done us individually and collectively.

The board has issued three hundred and eighty-four certificates; of these, nine passed the regular examination given in January, 1905, and two others were given special ones, as they were in quarantine in January.

The hospitals in different sections of the State have been apportioned to members of the board for inspection in order that a definite idea of the curriculum of all schools may be obtained; for this purpose a list of questions has been prepared and will be filled by each inspector as she visits the schools. We hope that this may bring the board and schools in closer touch. The subject of instituting a Sick Benefit Fund has met with distinct approval from all societies of nurses in the State, and we hope to have a goodly sum towards the Sinking Fund at our meeting in Richmond, May 10, 11, and 12.

Much thought has been given the establishment of a home for the care of tubercular patients, and to Richmond we look for great things, as Misses Cabaniss and Minor are especially interested in this matter.

Many interesting subjects, including the advisability of a domestic science course in our public schools, came up for discussion at our last meeting, and in Richmond we hope to continue them to some purpose, and we trust that next year will find us with much good accomplished.

MISS McMILLAN.—Illinois has a State association of about six hundred nurses. Our work this year has been entirely for State registration. Our bill was in Springfield early in the fall and it is still there. I would like to state, however, that we have had the support and assistance of the medical profession and the main organizations of the women of the State, and we rather hope that our bill may go through and are waiting hourly for news. During all this period of our work there has existed the most absolute harmony among the nurses of the State.

MISS MARTIN.—The society in Maryland has two hundred and sixty-seven members. At the Philadelphia meeting we reported that our bill had been signed by the Governor and we have really gotten into working order, and have the machinery all well oiled. We have received seventy-five applications for State registration and we have issued fifty-one certificates. We have no fears in Maryland, and I, being a Massachusetts nurse, sympathize very much with the Massachusetts nurses in their troubles and tribulations, and I think the tribulations of Maryland, if we have any, may be that we are looking forward to possible amendments of our bill, but I think that it is wonderful, when you know how the hospitals have tried in every way to come up to the standards of the bill. We have no fears in Maryland, but have some hopes in the future.

MISS PALMER.—There should be a word said regarding California conditions here. In the last mail before I left Rochester to come down here I received a letter from the secretary of the California State Society in which she told me that the president of the Board of Regents of the State of California had asked for a conference with the officers of the State association in regard to the work of the future and the appointment of the examiners. This is very gratifying, since the State association was obliged to leave the whole matter to the Board of Regents. That body, however, shows great inclination to conform to the wishes of the nurses' society.

MISS GRANT.—The Indiana State Nurses' Association is now eighteen months old, and we have an individual membership of two hundred and twelve. It was

formed on September 14, 1903, for the purpose of obtaining State registration in Indiana. The bill was approved in September, 1904, and was passed in January, 1905. We are now looking for information regarding the formation of the board. The association is affiliated with the Indianapolis Graduate Nurses' Association and with the Hope Hospital Nurses' Alumni of Fort Wayne.

MISS FALCOWEN.—A mass meeting of the Rhode Island nurses was called in Providence on October 31, 1904. Eighty-six nurses were present and the subject of State registration was discussed. January 25, 1905, a charter was granted by the Secretary of State. A bill was drawn and presented to the Legislature on March 31. A public hearing was asked for by representatives of special hospitals. This was given on April 11 at the State House, before the Judiciary Committee. Those who were instrumental in drafting the bill felt that they had used the better and stronger points of many of the bills from other States, only to be told by those opposed to the measure that they had selected the very worst, and that, instead of protecting the public, it was quite evident that only Rhode Island Hospital nurses had been considered. We hope next year to have more favorable and satisfactory conditions to report.

MISS CAMERON.—I would say for New York that we have had our fourth annual meeting and things are going along very smoothly. To those who are forming Examining Boards I think our experience would indicate advance; we have held on to every privilege, took all we could get, and asked for more. Do not give up any power that offers itself and grasp everything in sight. You need all you can get and more too. The society is past the fighting stage, and while the growth is not so large it is steady and gratifying.

MISS PALMER.—It seems to me that it would be a very great help if when all of the members of the State associations came together at these annual meetings there could be a sort of an informal meeting or conference and discussion by the members of the board and the State officers who might be present. I am sure there are a great many questions we should like to settle at once and talk over in an informal way, and it would send us all home very much better informed and make it possible for us to work on more uniform lines. There are a great many points that in our relations with boards, trustees, or the Board of Regents or State officials can be discussed privately, but not publicly; they are what you might call family affairs, and we ought to get together and talk them over and find out what course has been taken in one State that might be of benefit to another. We might have a secretary or a chairman to call the members together and have an hour's talk during these conventions, when we might have just this kind of an informal convention.

PRESIDENT.—I think that point is most excellently made, and possibly Miss Palmer will call such a meeting at the end of this session, when all the delegates of the State societies, I am sure, will respond. An opportunity will be given now.

MISS PALMER.—I make that call now. If after this meeting is over all the delegates from the State societies will come over to this corner of the room we will have a little talk.

PRESIDENT.—We will ask Miss Alline to tell us something of the work of the class in Hospital Economics, its needs, etc.

MISS ALLINE.—I was asked to speak on the special needs of the Hospital Economics Course. As the circular for that purpose is just out and very definitely states the purpose of the course and its financial need and will be distributed, instead of discussing that side of the question I will try to answer some

of the questions most frequently asked by prospective applicants. The one that comes uppermost in the minds of some is, "Do you guarantee positions to graduates?" There are always more positions offered than can be supplied. Of the thirty-two members of the class who have completed the course twenty-three are in positions, others are in correspondence relative to positions in prospect, and still others are waiting for more inviting places to be offered. There is nothing to be promised in that way, but the course certainly is filled to overflowing with the best kind of opportunities to broaden and develop a bright woman. Ability cannot be produced, but if it is there, if there is the student mind and attitude, it finds at the college the proper environment and a stimulus that cannot help but make it grow and achieve good results. The details of the expense of the course will be given in the next number of *THE AMERICAN JOURNAL*, but considering it from the business standpoint we can only look upon it as an investment, and surely it pays a royalty. Eight months of culture and education for a graduate nurse is invaluable to herself and to the women she will have in her training in the years to come.

I wish again to remind you that a year—a school year—is not sufficient for all the work we would like to do or feel that we need to do. Our tendency is to overcrowd. We could well take all the time and strength of our students with the studies mentioned in the circular of information, but more often than otherwise there are various attractions in other departments of the college and university that must be taken as part of the general education we are seeking. The course is limited to thirty-six "points" (notice the schedule in the circular), and only thirty points are required. The wise student will carefully work over her programme and limit herself to as low a number of points as possible in order not to overdo by taking in the extras, which are quite as important, oftentimes, as the scheduled work. Circulars of information and copies of the appeal may be had by application to the secretary of the college or to myself. Visitors are always welcome at Teachers College.

The president asked Miss Damer to take the chair, as she wished to have the privilege of the floor.

Miss RUSSELL.—In view of what the State association has done in Michigan and in view of what the Superintendents' Society has been doing all these years for that course at Columbia College, and in view of the fact that they have done much for the graduate nurses, I would like to make a motion that we, the graduate nurses here assembled, do invest one hundred dollars of our surplus money in this work at Columbia to carry on the course for the next year.

Seconded by Miss Davis and carried, after which Miss Riddle resumed the chair.

FORRESTER.—I would like to appoint at this time the Committee on Resolutions to report at the close of this meeting, and on that committee I will appoint Miss Tippet, Miss Hindlark, and Miss Rothfus.

Miss GOSWORTHY.—I would like to thank you in behalf of the Committee on Hospital Economics for your very generous assistance. I thank you as the chairman of the committee, because I feel that the needs of the class are very great and the interest we have in it is very great. I only hope that the association will feel as proud of it that they will be able to assist the class in this way, not only now but in the future.

FORRESTER.—I will announce at this time before there is any possibility of dispersing that there will be a short executive session at the close of the pro-

gramme; we will be as expeditious as possible and have you dismissed as near the regular time as we can. We will continue the programme by calling for the first paper of the day.

CLUB-HOUSES, HOSTELRIES, AND DIRECTORIES FOR NURSES

By MISS MARTHA M. RUNSKILL
The Sloane Maternity, New York

"In June, 1893, among the papers presented to the section devoted to hospitals, dispensaries, and nursing at the International Congress of Charities, Correction, and Philanthropy was one by Miss Katharine L. Lett, then superintendent of St. Luke's Hospital, on 'Nurses' Homes.' In this paper, after discussing the essentials of a home for pupil nurses, she says: 'Good homes, however, are needed for our graduates. Establishing such homes has been discussed from time to time, but difficulties seemingly insurmountable always arise, so the idea has never become a reality, and the graduates go on living as they have always done, in boarding-houses more or less uncomfortable and certainly very forlorn.'

"It is the object of this paper to tell about some cases in which these 'insurmountable difficulties' have been conquered, and to outline the progress made by nurses during the past twelve years in providing for their efficient work by well-managed directories and for their comfortable living by club life in some form.

"At the second annual meeting of this society in 1899 Miss Mabel Mason, of the Brooklyn Hospital Alumnae, read a paper on 'Registries' which was very fully discussed and the necessity emphasized of having a broad-minded, clear-headed nurse who understood her public, her doctor, and her nurses in charge of the enterprise, as she alone could be expected to have the requisite wisdom for controlling the situation. One cause for anxiety spoken of in that discussion was the danger of the registries from undesirable members, and we still have cause for care on that score, although, with genuine American reliance on the cure-all of legislation, we trust the letters 'R.N.' will take care of that matter for us, and undoubtedly we are in a much better position than we were six years ago.

"The papers by Miss MacMillan, Miss Phillpotts, and Sister Ignatius on 'Central Registration' read at the last annual meeting showed that the nurses were still studying the problem, still believing that nurses should bear the responsibility of their own affairs, and still feeling that the problem was a difficult one.

"The private nurse requires an attractive room to which to return between cases, use of a telephone, someone who can be business like in attending to her calls and letters, and, rather necessarily, a permanent address.

"In the smaller cities there seems to be comparatively little difficulty. The nurses can have comfortable quarters for prices they can afford to pay. The superintendent of the hospital knows personally both the nurses and the doctors who employ them, and usually adds the keeping of a more or less complete directory to her multitudinous duties.

"In the larger cities some form of a directory has become a practical necessity, and various are the attempts made to meet the demand. There is the distinctly commercial registry, usually opened in connection with a boarding-house by someone who wishes to make money, where the nurses pay for their rooms and receive any calls they may have, sometimes paying one dollar or two dollars for each case they have. Some of these establishments are thoroughly well managed, great care is taken to admit only competent nurses, the rooms are made comfortable, and the manager is honestly entitled to every penny earned; but too often the nurse comes in tired from a hard case, finds a cheerless room, a poor bed, letters received days before unforwarded, and none of the evidences of thoughtful care she has a right to expect. She is too tired even to make effectual protest. Then she goes to another case before anything is improved, and so goes on from month to month, perhaps year to year, spending her money for unsatisfactory accommodations and gaining none of the rest that should be hers between cases.

"A means of securing additional income which must necessarily appeal to those conducting registries for profit is charging a fee—usually one dollar—to each person who obtains a nurse through the registry. The nurse is expected to present this bill for the registry on her arrival at the patient's house. The amount of the bill is small, but the practice seems to be entirely without justification on professional grounds, and its discontinuance should be demanded by the nurses in behalf of their profession.

"In several cities—Philadelphia, Pittsburg, and Boston, for instance—there are large directories controlled by the medical societies, and the annual fees paid by the nurses yield a profit to their treasuries after the registry expenses are paid.

"The Training-School Boards are responsible for conducting a registry for graduates of the Illinois Training-School and of Bellevue and Mt. Sinai.

"The New York Presbyterian Hospital has a registry conducted

under direction of the officials of the school in conjunction with the alumnae, and its surplus fees help swell the sick fund. The Good Samaritan Hospital in Los Angeles has just started a similar arrangement. St. Luke's (New York) gives a room for the nurses' directory and the alumnae pay the registrar and control the matter.

"The New York Post-Graduate Hospital Alumnae have established their own registry, conducted by one of their graduates, and, having just completed a successful first year, hope that their funds may grow sufficiently to have a club-house in the near future.

"The Roosevelt Hospital graduates' directory is under the immediate charge of the superintendent of the school and has no fees.

"Grace Hospital, Detroit, also serves its graduates in this way.

"Rochester nurses have club-rooms in connection with the Monroe County Registered Nurse Association, and there is a directory under the control of the Alumnae Association.

"In Cincinnati the Graduate Nurses' Association have for six years controlled their registry.

"The Indianapolis Graduate Nurses' Association have the nurses' register under their own management.

"New Haven nurses have made some successful attempts at coöperative housekeeping, and the alumnae of the Connecticut School are planning to raise money to enable them to buy or rent a house for a club and control the whole situation.

"In several instances the Pittsburg nurses have clubbed together, rented a house, and by employing a working housekeeper live very comfortably for a rent of seven to nine dollars per month.

"In New York City this winter our directories have had an unexpected difficulty to meet in that an act passed in 1904 to regulate the keeping of employment agencies, and intended by its framers for the protection of immigrant girls, was construed to cover nearly all the registries for nurses in the city, as the agencies for obtaining employment for school-teachers were the only ones excepted. The fees were considerable, and the annoyance more. Lest there should be a question as to this ruling, the Commissioner prepared an amendment specifying that directories used by nurses for procuring work should be subjected to the inspection and the rules of his bureau and pay the fees required. The New York post-graduate nurses called a meeting of protest which was well attended, and the following week Miss Delano and Miss Damer went to Albany and appeared before the Committee on Affairs of Cities, making earnest pleas that registered nurses be mentioned with teachers as exempt from the supervision of the Commissioner of Licenses. It seems that all danger from that direction is

past, but it illustrates our need for alert attention to the proceedings of our Legislatures.

"Directories in some form have their place in practically every city and we have the opportunity of increasing their efficiency in helping the patients, the doctors, and nurses in their business relations with each other, and we may hope for advance in proportion as we are determined upon it, for the nurses are the ones on whom rests the ultimate responsibility for good service.

"The Alice Fisher Alumnae Club was established in 1895, and graduates of the Philadelphia Hospital are eligible as members. They occupy the pleasant house at 804 Pine Street as their home and have about thirty resident members. The large parlors on the ground floor are used as club-rooms and are frequently in use for business or social meetings. Each member pays annual dues of five dollars. They have a pleasant dining-room where meals are served for fifty-five cents a day. There are no single bedrooms, but each nurse has her own bureau and hanging-closet. The room rent is seven dollars per month. The club is entirely self-supporting and its government is vested in a board composed of fifteen house members. A directory was tried when the club first started, but it proved inexpedient to continue it. The nurses are happy in having a homelike place for themselves.

"This is the only club in Philadelphia managed by the nurses, although the matter has been discussed hopefully by some of the other associations.

"The Boston Nurses' Club was organized about six years ago and has grown from about eighty members to two hundred and fifty. The registry and assembly-rooms, where lectures were given by physicians and others, formed the nucleus around which the club has grown. In 1902 a flat was rented where they have rooms for the club meetings and for seven resident members. Here there are lectures given about every fortnight and afternoon tea is served one afternoon each week, so this club is a pleasant (social) and (professional) centre for the members.

"In the Roxbury district the Alumnae Association of the New England Hospital for Women and Children have for two years used as club headquarters a house rented them by the hospital at one-third below usual rates. Eleven members of the association formed themselves into a company and took shares of twenty-five dollars each, and consider themselves as trustees for the alumnae association. The charges are arranged according to rooms, and members of the alumnae are eligible as residents. The first year they paid four per cent. on all shares and in the income covered all expenses. The secretary writes, 'We would

advise any body of nurses who wish the comforts of a home and ideal living to venture to start a club.'

"In New York the Presbyterian, the Post-Graduate, the Metropolitan, and New York City Alumnae Associations have done some experimenting and some planning and some discussing, but as yet have not succeeded in putting firm foundations under their air castles.

"One difficulty is overcoming the natural conservatism of women, who are reluctant to undertake a new venture involving so large an outlay of time, money, and thought, lest in the end they should be less comfortable than in the beginning.

"In the fall of 1897 the New York Hospital Alumnae Association decided to have a club-house with rooms for resident members, club-rooms, and a registry. A bazaar was held in November to raise the funds necessary to rent and furnish a house. The following February a house in Forty-ninth Street, with rooms for twenty-one, was opened for occupancy. Miss Margaret Munn, one of the graduates, took the position of superintendent, and before long it was evident that success was ours, for the rooms were attractive, the registry popular, and the nurses found it a desirable place to live for both professional and social reasons.

"At first no meals were provided, but after a few months the members felt that it would add greatly to their comfort to have a dining-room, and one was opened. Before the end of the first year it was evident that larger quarters were needed, and the next house was rented, giving them more than twice as many rooms. Of course, the early months did not pass without anxiety and heavy strain on the courage and patience of the three or four members of the association, who, as is usual in a coöperative undertaking, were the brain and will of the project, but they went bravely on their way and soon were rewarded by seeing the club in flourishing condition.

"The demand for rooms was so great that in 1903 ways and means of increasing the available accommodations were discussed, but no change was made until 1904, when a double apartment house at 8 West Ninety-second Street was leased for five years at an annual rental of ten thousand five hundred dollars, providing rooms for about one hundred members, and the nurses took possession last May.

"On the lower floor is the club-room with its piano, its books and papers, serving as a social centre for the residents. During the winter afternoon tea was served here Tuesday and Friday for the nurses and their friends. Across the hall is the office, with the telephone, having extensions to every floor, the bulletin board, and the registry headquarters. The rear rooms on the lower floor are the dining-rooms, where a

good table is set for five dollars and a quarter per week, a ticket system controlling the sale of meals. One second floor front room is furnished as a reception-room and the rest of the house is occupied by nurses' rooms. There are a few rooms for two nurses, but small rooms that members rent for thirteen dollars per month are the rule. The objection frequently urged against clubs—the lack of privacy—is practically obviated, as each apartment is distinct from every other, and so the coveted quiet resting place is found when a nurse enters her own room.

"The control of all club business has always been in the hands of the Alumnae Association, the officers of the association being the Governing Board.

"We are proud to say that the end of the first year finds us in satisfactory financial condition, confident that the club meets a genuine need, and while from time to time something or other happens to remind us that we have not obtained ideal conditions, we have courage to face the future, with faith to believe that the answers to its problems will be found when the questions are fully stated.

"In closing this very incomplete account of nurses' attempts to make homelike dwellings for themselves I wish to thank those who have taken so much trouble to send me information and to express the hope that we may hear of many other successful efforts in this direction. Let us hope that the coming years may see the nurses even better comrades, and that, profiting by the experience of the past years, they will be successful in establishing clubs, fulfilling not only every requirement for food and shelter, but also serving the members and the community as centres of uplifting influences."

Pennycuik.—As I have said before, it is with extreme regret that we are unable to call for discussion upon these papers, but the time is passing so rapidly, and we still have so much to do, that I do not feel justified in calling for discussion, much as we wish to; therefore we will pass on to the next paper and ask Miss Frederick for hers.

THE OPPORTUNITIES OF THE GRADUATE NURSE

By MATILDA A. FREDERICK

The New York Training-School Alumnae

"To the nurse who wishes to do real good and lasting benefit to mankind, as well as to maintain a growing bank account, there are many opportunities in the unexplored field of 'hourly nursing.' To the wealthy class of people the private nurse is always ready to cater, and many persons indulge in this expensive luxury upon the occasion

of every slight indisposition, as well as serious illness, when not infrequently two to five nurses are employed. To the very poor the visiting nurse of city, church, or dispensary is ever ready to minister, but the so-called middle class of well-to-do people, whose income is not sufficient to employ a graduate nurse without great sacrifice, must either go without care in their homes or go to a hospital. So to this class of people the 'hourly nurse' would find it profitable to minister. A visit once or twice a day to give a bath, make the bed, take temperature, and such other ministrations as come properly within the province of a graduate nurse, with directions to some member of the family for giving medicine, is all that is needed in many cases.

"The charges for these visits is usually one dollar for the first hour and fifty cents for each additional hour, though some nurses charge one dollar an hour and some only one dollar a visit. Thus one has the advantage of a variety of patients and the daily outing in going from place to place, instead of the deadly monotony of constant attendance upon one individual, often querulous and exacting, taxing the patience and ingenuity of the nurse to provide entertainment and give satisfaction to family, friends, and a large circle of acquaintances. Two or three visits a day would be quite as remunerative as one private patient, with much more independence in living one's own life.

"That so little has been done in this department of nursing is said by some to be because there is no demand for it. But the demand certainly would be very great if there were a supply. Like every new field of labor, it must be intelligently worked up.

"One New York nurses' club has on its register nurses who will respond to calls for hourly nurses, as well as masseurs and nurses for operations. The latter named go into a house and prepare the room and patient for operation, taking with them everything necessary in the way of sterile linen, dressings, and towels, taking away all soiled linen, also furnishing basins, pitchers, etc., thus relieving the family of nearly all care and extra work, about all they have to furnish being plenty of boiled water. For this service the nurse charges from ten to twenty-five dollars.

"Of course, to secure calls for such cases one must be known to surgeons who require such service. One nurse whom I know in New York, after graduation spent one year in the operating-room of her Alma Mater, and then visited the largest hospitals at home and abroad that she might the better serve a large circle of surgeons from different schools. She obtained endorsement from those to whom she was personally known, then sent circulars to everyone whom she thought could possibly need her services, with the result of a very busy winter just

past, making one hundred dollars a month. She also does hourly nursing, giving baths, rubs, douches, hot or cold packs, enemata, bladder irrigations, treatments, etc. But, as she expresses it, 'One must hustle' if success is to crown her efforts. Another nurse who has been some years in the work thinks there will be a great demand for hourly nursing when the people are educated up to it. Many persons tell her, 'Why! I can get a trained attendant for what I pay you, and have her all the time.' In places where this element is not to contend with, I am told there is a great demand for hourly nursing, and cities and country places outside of New York offer great opportunities.

"A good, all-round nurse will always have as much work as she can do in any small city or country town, with social advantages that are not always hers in the large cities. I would urge the graduate nurses to cultivate these fertile fields.

"The Victorian Order of Nurses, instituted by Lady Aberdeen to commemorate the Diamond Jubilee of Queen Victoria, is intended to benefit any person whose means are not sufficient to employ a graduate nurse. A fee is charged ranging from five cents to fifty cents, according to the circumstances of the patient. The *very poor* are nursed without charge. The nurses do not attend infectious cases, but take maternity, medical, and surgical cases; also make preparation for and assist at operations and do surgical dressings.

"As a rule one nurse cares for three patients between the hours of eight A.M. and one P.M. The regular night nurse may be obtained for an eight-hour service. Emergency visits are also made, and confinements attended at night. To become a member of the order a nurse must have graduated from a recognized training-school for professional nurses, and must serve four months on probation. The order is supported by voluntary subscription and donations and fees received from patients.

"The Toronto branch has a home under the management of a lady superintendent, from which nurses are sent out, but only when the physician in attendance is willing to have the nurse care for his patient.

"Nurses residing in the home receive not less than twenty dollars a month for their services. Every nurse admitted to the order receives a bronze badge and a certificate of admission, and must wear the uniform of the order.

"In *THE AMERICAN JOURNAL OF NURSING*, September, 1903, a Victorian Order nurse very graphically gives some experiences of her work at Fort Frances, Ontario. With the thermometer ranging from thirty to forty-five degrees below zero, she crossed a frozen river three times a day to visit a very sick patient on the American side, 'tramping

through snowdrifts, crossing in fogs, getting fastened in the anchor-ice, and at times helping to break the ice.' She also states there is absolutely no poverty in Fort Frances, nor yet is there any very great wealth. But when a nurse is called to a patient, be it in a hotel or in his own home, here is no easy task, for since the grown-up daughter, neighbor, or maid is absent, the entire work devolves upon the nurse.

"Let us then think less of the growing bank account, and more of the nobler and higher aims of our profession, remembering that

"There are lonely hearts to cherish,
While the days are going by;
There are weary souls who perish,
While the days are going by;
If a smile we can renew,
As our journey we pursue,
Oh! the good we all may do,
While the days are going by.

"All the loving links that bind us,
While the days are going by;
One by one we leave behind us,
While the days are going by;
But the seeds of good we sow,
Both in shade and shine will grow,
And will keep our hearts aglow,
While the days are going by."

THE OPPORTUNITY OF THE NURSE IN PRIVATE DUTY

By MISS ANNIE RHODES

New York City

"The increase of the work in the hospital has extended the curriculum of the training-school, and the supervision thus made necessary has created many positions for the graduate nurse. This, however, while it may lessen the ranks of the private-duty nurse, benefits her materially, and it is the private nurse who, in the main, represents her profession to the world at large. Her opportunities for influencing the public are many, and the reputation of her school in particular, and her profession generally, is formed from the impression she herself creates. This important fact is not always realized sufficiently. The coming of the trained nurse into a family for the first time is anticipated with feelings of probable relief and possible trouble, for we are thought to be angels of mercy and hope or perfect terrors, as may be. The technical responsibility of the case, apparently, is the physician's. A nurse means one who is to carry out his orders carefully and properly.

When anxiety for the patient is somewhat allayed, the personality of the nurse interests the family, and then it is that the woman in her must survive a test. If she prove adaptable and accommodates herself to circumstances,—and we all know that a household is not in the usual running order during illness,—she will be blessed not only for being a good nurse, but for being a woman who, discerning the necessities of the situation, conforms to conditions readily and without undue comment. How many nurses answering calls appreciate that the 'case' is not the only consideration? While the drain upon her personality means constant depression and subsequent weariness, the fact that the nurse may be a friend indeed is not the least of her opportunities. When I hear that a nurse returns from the theatre to her patient at eleven-thirty P.M., of one who gives up the case about an hour before time to go on night duty, I wonder if the obligation to her patient, the ethical side, be fully understood. Instances like these—and they are true—do not make for favorable impression with the public. When, on the other hand, I am told that a nurse, being called when off duty, was actually reading a novel, I reply that she is a human being—not a machine to eat, sleep, and work alone.

"There is no more 'occupying' vocation than ours, sixteen or eighteen hours on duty, subject to possible call the rest of the twenty-four, but it seems to me there is one opportunity of which the private-duty nurse might avail herself, though it may mean extra effort. In keeping pace with the advance of her profession she may in many ways educate laymen to an appreciation of progress in nursing. It may require some management to attend alumnae, county, and State meetings, but by being in touch with the nursing world one helps to make its history. Is it nothing to people that nursing now has a legal status, that only graduates from schools qualifying can register under the Regents, expelling the improperly and half-trained women from the protection of the name of our profession? Help to make the registered nurse *the* nurse.

"Recently in reply to my question, 'What are you doing for the profession?' a private nurse said, 'By staying five years with my patient, I am proving that my school trained me well, and that I am a good nurse,' and while I tried to impress upon her that her influence was too limited, I agree that one who maintains her individuality and upholds the honor of her school is doing something towards making her profession the honorable calling it should be."

PRESIDENT.—This concludes the papers upon this subject and brings us to the next topic, that of "Army Nursing," by Miss Wilson, which will be presented by Mrs. Kinney, Superintendent of the Army Nurse Corps.

REMINISCENCES OF AN ARMY NURSE**By MISS HIBBIE WILSON****Midway, Ky.**

"The Army Nurse Corps was only an embryo in 1898, when the demand for nurses suddenly became so great, and it has been a plant of slow growth. Even now—seven years later—the flower of its usefulness is still in bud, and the glory of full fruition far in the future. Under the pressure of war nurses were taken from any and all schools, and many were accepted who had never had any training at all. Some were the so-called born nurses without training or experience, who knew absolutely nothing of nursing but claimed to be yellow-fever 'immunes.' At that time the Government, with thousands of fever cases in its hospitals, was thankful for all aid, and the nurses frequently did eighteen to twenty hours' duty out of every twenty-four.

"My first experience was at Jacksonville, Fla., in the latter part of August, 1898. I reached that place about nine A.M. in company with another nurse whom I had met on the train. We went at once to the Chief Surgeon's office to find that he was not in, and from there were directed to General Lee's Headquarters, whither the Chief Surgeon had gone on business. Following him from place to place, we at last overtook him during the afternoon and reported our arrival. I immediately applied for duty in Cuba, adding that if he would not send me I would see the commander of the corps, who came from the same part of the country that I did, so that I felt sure that I would have little difficulty in getting him to gratify my desire. I blush now as I remember this most unmilitary procedure, but the Chief Surgeon was very courteous and promised to put my name down for Cuban service. I have since appreciated his kindness in not mortifying me by telling me what I now so well understand, that all such applications should be made through military channels, of which at that time I knew nothing. My companion and myself were ordered to report to the commanding officer of the Second Division Hospital, and we arrived at these headquarters about five P.M., thoroughly tired out. The commanding officer turned us over to the executive, who took us to the nurses' quarters, a big frame building in the middle of a large sand-lot without shade or a spear of grass. Anything more dreary cannot be imagined, but we were in no mood to be critical, as we were both weary and hungry. The executive officer sent for the chief nurse, who assigned us to our room. This was an enclosure of four bare walls, containing a washstand, small looking-glass, tin washbasin, two iron beds with a wire spring (no mattress), and one army blanket apiece. Between six and seven the next morning

I was shown a tent ward of seventy beds, part of which was used as a surgical ward and which was to be my sphere of usefulness. There had never been a trained nurse in this ward, corps men only having been in charge. These good fellows were sadly overworked, often doing twenty hours' duty daily. They knew nothing about 'lady nurses,' as they called us, and I often wonder if we were all entitled to that name.

"I found everything in a chaotic condition. There were about twenty of the sickest fever cases I ever saw. They had been rushed to the hospital in such numbers that some had had no baths since coming in. Suitable food was hard to get and cleanliness was at a premium. A concoction called broth, some condensed milk, and brandy were given to the patients out of a tin cup. The patients' clothes, blanket rolls, and barrack bags were thrown under the beds. Clean linen was very scarce. Most of the men were on bare cots—often without a sheet. There were no rubber protectives or portable tubs. You can imagine that cleaning up the patients and the ward was not a very easy matter.

"The sickest man was a young soldier from Indiana. He had a temperature of one hundred and five degrees, pulse imperceptible, bed-sores on the whole of the lower part of the back, six big carbuncles on the back, several on the arms and legs, abscesses of glands of the neck on both sides, so swollen that he breathed with difficulty. I began my labors of love with him. It was not thought possible for him to live, but he did, and I have a picture of him in perfect health taken six months later. The other cases were in all the different stages of typhoid. Even nurses did not escape. Twenty-five were down at one time, with no deaths. Of the patients we lost three—one a husky looking German, who lived only five days after admission, and another a little lad of about eighteen, who begged most pitifully for his mother and his sweetheart up to the last. The third was a son of a physician from Illinois. The day the last one died the most terrific windstorm I ever saw swept over the camp. The Morgue, which was only a tent, had the top blown off and left its six gruesome occupants exposed to the elements, there being no other place to take them. Indeed, we were all fearful lest the entire hospital should be blown over.

"At this stage our work was seriously handicapped for want of supplies. The Red Cross helped us very materially; the first hot-water bag, ice-cap, and oil-stoves I had they gave me, also extra thermometers and nightshirts. The liquid diets were much better prepared after we got the oil-stoves, as then we made soups and broths for our sickest patients ourselves. The diets they had been getting were sent from the large mess kitchen every three hours, where the cook was a corps man, who had little knowledge or experience in preparing food for the sick.

"An eminent chef once said that to make good soup was a test of a good cook. So, quite naturally, those made in our hospital kitchen left a good deal to be desired. After the nurses came the conditions were improved. The men on duty in the hospital were only too willing and glad to do the best they knew for the sick, and though some of the nurses sent down were not much of an improvement over the corps men, all worked desperately hard for the common cause. There were no convalescents. As soon as the men were able to sit up, and often long before, they were put on the hospital trains and sent to the large general hospitals at New York, Atlanta, and Fort Thomas, thus making room for the new cases which were sent from all the different regiments. Eventually the number of nurses was gradually increased till we had one hundred and seventy. The regiments were going home to be mustered out, the hospital trains had taken thousands of sick home, and things were just getting systematized and on a good running basis with plenty of supplies when we were ordered to Savannah. Then began the first weeding out of nurses. All were not needed; some left at their own request and others were sent home. Just at this time I went home sick with typhoid. When, later, I was fit for duty again I was ordered to report at Savannah, Ga., and found there that our old commanding officer had gone to Cuba with General Lee, and our old executive officer was now in command of the hospital. I found a beautiful camp hospital about five miles from town: the patients were not desperately sick; supplies were more abundant, and all the conditions were greatly improved; little of interest happened with the exception of an epidemic of cerebro-spinal meningitis, which lasted only a short time, but was very fatal. From it we lost a number of cases. The weather was exceedingly cold and we suffered because of it, as we only had little oil-stoves in our tents. Even under five or six blankets it was impossible to keep warm at night.

"We were all glad when orders came for us to sail for Cuba. Our commanding officer had been trying to get away to Cuba with us for some weeks, so when the summons came we stood not upon the order of our going, but went at once. The order came about nine in the evening, and twelve hours later found us on board and ready to sail. Our party consisted of the commanding officer, five doctors, and forty nurses, and Colonel W. J. Bryan's regiment with all its officers excepting the colonel himself, who had concluded not to go to Cuba, but to stay at home to try to become President! I understand he is still trying!

"We had a pleasant and uneventful trip down, and anchored in the harbor of Havana the morning of the new year, 1899. The beauty of that sunrise is with me yet, nor can words express how the sight of

the sunken Maine affected our patriotic and enthusiastic hearts. It was soon evident that the doctors and nurses were not expected (indeed, I even fear they were not wanted). Our commanding officer started at once to find some place to deposit his white elephant of forty nurses, leaving us in charge of one of the medical officers, who wished an opportunity to air his Spanish. We were not allowed to leave the boat, but hung around till late in the afternoon, when the doctor in charge of the party was ordered to take us down to the Concho Station and thence by the train to Quemados, about eight miles distant, where we arrived without any mishaps—thanks to this one lone man. But at the station our troubles began. At that time an American woman was a *rara avis* in Cuba, which (rather than our personal attractions) may account for our enthusiastic reception by the native urchins. They were the worst lot of beggars I ever saw—seeming to beg from force of habit rather than from necessity. I was wearing a yachting cap, as my hair had been cut short after typhoid. The children evidently became enamored of that cap, and about twenty dirty little beggars (I started to say ragged, but they wore too little apparel to use that word) grabbed me and tried to climb to my head to remove it. The doctor had to knock them off as he would brush flies. We threw them coins and they were easily appeased. There were also some beautiful Spanish women watching us as we came in. When they realized who we were they said in Spanish, 'God bless the American *senoritas*! I hope they will have yellow fever and die.' It is hardly necessary to explain that the Spaniards had very little use for us at that time.

"We reached Quemados about seven o'clock that evening in a drizzling rain and pitchy darkness, with no one to meet us or to tell us where to go. After sitting around on our dress-suit cases and grips for an hour or more, our major drove up in the only carriage the place afforded and took one of the nurses who was ill, leaving the rest to get to camp as best they could. It was raining hard and we were a bedraggled looking party as we started out. Some of us overtook a wagon with our baggage and two of the doctors. Two of the nurses and myself climbed up on that load and held on for dear life, feeling that anything was better than walking. But even this was too good to last. The night was so dark that one could not see his hand before his face. In an unguarded moment with a sudden plunge the horse went headlong into one of General Weyler's 'trochas.' Luckily, we were not pitched off, but there was nothing left to do but to climb down from our perch and walk the rest of the way. The doctors remained behind to help get the wagon out. When we reached camp we found most of our party already there. We were certainly the most woebegone looking

crowd you can imagine, and soon discovered that, worst of all, we were *persona non grata* at that hospital. No courtesies were extended to our commanding officer, and he had no choice but to sleep on the floor. That hurt us more than a discourtesy to ourselves, as he had been most kind and had worked hard for our comfort. Our supper that night consisted of crackers and tea ~~and~~ milk or sugar! Slim diet for forty hungry nurses, but we comforted ourselves that we ought to be soldiers first of all, and these incidents were but the fortunes of war. While we were regaling ourselves with this sumptuous repast the fatigue gang had stretched tents for us and put up cots. They brought us each a big army blanket. This was going to Cuba!—that long so many of us had dreamed of and longed for! Ours were only fly tents without floors, and the water had as unquestioned access to us as if we had been covered by only the sky. Naturally, the ground was soaking wet. We took off our outside clothing and shoes and took them to bed with us, covering ourselves and them with our blanket. It did not take long to soak this though, so we divided the party into two shifts, one set to hold up the umbrellas, while the other slept. This continued for many nights. Our clothing was so damp in the morning that we could scarcely get into it. For several days we had no wash-basin and had to walk a quarter of a mile to an old well to wash. When we got back we always found breakfast ready, which consisted of tea, hard-tack, and beans.

"None of our nurses were put on duty at this hospital, and we hung around for two weeks longing for orders and for work at some other place. We surely were a happy lot the day that Major McDill sent word that he was about ready for us, so we went over at once. The floors to our tents were down and we sat on these and waited until the canvas was spread. And what a good supper the corps men cooked for us that night!—hot biscuits and molasses. The men seemed very glad to have us back and were willing to do anything to make us comfortable. We were there a few months before the regiments started to the United States, and the nurses were sent home as the need for them lessened. We had some typhoid, several tetanus cases resulting from vaccination, yellow fever, and pernicious malaria. Our duty in Cuba was light. We had all the supplies we wanted for the patients, the mess was good, and it would have been difficult to have improved our camp hospital. The first crowd of nurses we sent home were twenty in number, the others were sent to the small regimental hospital until only five of us were left. We remained until the hospital was closed, and when not a patient was left these five came to New York. Our old hospital was a dreary looking sight. The afternoon we left

the tents were pulled down, so there was nothing left but the board floors. We were glad to get away, as it is very depressing to be the last one in a place where we had been such a happy number together.

"My next place of duty was at the United States General Hospital, Presidio, Cal., where there were any number of sick men with all manner of diseases, from smallpox down. The hospital was in fine running order under the able management of Colonel Girard and Captain Kennedy, and was fully equipped with every necessity and luxury. The staff of doctors, nurses, and corps men were now adequate and competent.

"I sailed for the Philippines in October, 1899, as one of a party of eight nurses. We were the only women on the boat, and every courtesy and consideration was shown us. We were assigned to duty on the boat, but the only patient was one soldier sick from eating a quart of mustard pickles. We were ordered by the ship's surgeon to wash out his stomach, and the pickles all came up, but he died twelve hours later. This was the only thing to mar our otherwise delightful trip. When we reached Manila our work really began.

"When the first chief nurse reached the First Reserve Hospital she found the nurses going on duty in low-neck dresses with trains and blue bows in their hair. The hours of work were as each individual nurse chose, and the faithful ones—as it always happens—did more than their duty to even up the work neglected by the ladies of the trains and bows. It did not take Miss McCloud long to change all that. She enforced the wearing of plain white dresses, and wooed out promiscuous guests in quarters. The work was very hard. The nurses were on duty from twelve to fifteen hours a day and never thought of asking for hours or an afternoon off; one nurse in a ward of seventy patients, dysentery, fevers, and gun-shot wounds! For a time there were hospital tents up in all the available space where a tent could be stretched, and still there was not room enough for the cases. They were left on stretchers out on the ground or on the ward floors. The operating-room, dressing-room, and all the ground would be covered with stretchers with the wounded men just brought in from the line, or surgical cases waiting to be operated on or dressed. After the fighting was over and the regiments began to go home it was all greatly improved, consequently the duty was not so hard. But the climate is trying and enervating, and the hospital, an old Spanish one with no modern conveniences, was dirty and full of insects. One can hardly recognize in the present hospital its predecessor of those early days.

"Our General United States Hospital at the Presidio is to-day as nearly perfect in every respect as human effort can make it. It is the

largest Government hospital. It is composed of many buildings. First the administration building, with all its different departments, officers' quarters, dental departments, X-ray room, throat specialist department, and all the necessary administrative offices. On the east of the administration building is the nurses' quarters, on the west the hospital corps' quarters. Then the ward building, with nine wards of forty beds each. The officers' ward of twenty-four beds, our own laundry, ice-plant, electric plant for lighting and furnishing power for machinery and all purposes, and our own new and complete operating-room, which cannot be surpassed by any in beauty and completeness of appointment. The operating pavilion is about thirty-five by thirty-five with marble walls, white tiled floors, skylight, and ceiling studded with electric lights, so that it can be used either day or night. Adjoining are the anæsthetic room, sterilizing room, nurses' office, desks for writing, retiring room, etc., the lavatory for surgeons, with hot and cold shower baths, physicians' offices, recovery-room for patients after operation, dressing-room for cases where pus has not developed, and supplied with all modern surgical instruments.

"The wards are all heated by hot air, with a radiator along the sides of the wall, and ventilators that draw out the foul air under the foot of each bed. Each ward has a bathroom, toilet, linen-room, ward-master's room, and smoking-room, which is used as a dining-room for special and light diets, tea kitchens with steam heaters, separate egg-boiler, and electric stove. The floors are of polished hard wood, the beds high of white enamelled iron. The linen and all the supplies are in abundance and of the best. The food is far superior to that in the usual civil hospital. Each ward has a head nurse and at least one assistant day nurse, one night nurse, one ward master, and a day and night corps man. The corps men are enlisted men. Those doing duty on the ward are instructed by the nurses and are very competent men as a rule and are indispensable. There was a time when there was a great friction among them and the nurses, but that is past—they have learned to appreciate us—we, them. We call this our recruiting station, for here the nurses are sent for trial, but I hope you will pardon me for saying that our nurse corps is composed of one hundred wholly first-class women. They are supplied with everything necessary, as nothing has been spared which could contribute to their efficiency or comfort. (A tennis court and three pianos have been presented to the corps recently.)

"Last but not least is Fort Bayard, our hospital for treatment of tuberculous disease, where some most important and encouraging work is done. It is nine miles from the nearest town, in the mountains of

New Mexico. The altitude is six thousand and forty feet, which is sometimes trying to our nurses. Out of a post of five hundred men I think when I was there there were only four well ones, and these were the medical officers on duty. It is a little world of its own. The officers' quarters, nurses' home, and officers' infirmary are all on the line, then the enlisted men's infirmary up a short hill. Only the very sickest are brought here and are the only ones taken care of by the nurses. These certainly have the best, and everything that money, experience, and science can procure for them. The commanding officer has the care of all those patients at heart and each case has his own personal attention.

"Some of the results are marvellous. One officer was carried in on a stretcher so weak that it was feared he would not live to reach the post. He had nearly constant hemorrhage from the lungs and the sputum was full of tubercle bacilli. He remained eighteen months—was pronounced cured. Has since married and is in the Philippines doing duty. Another case—a soldier—came back from the Philippine Islands weighing ninety-two pounds, temperature 103° in the afternoon, night sweats, and seemed to be in the last stages of pulmonary disease. After six months he weighed one hundred and fifty pounds, had no cough, and is now perfectly well. Many other remarkable recoveries have been noted. The treatment consists of fresh air, sunshine, wholesome food, rest, and the care and attention of the most skilled doctors and nurses in the corps.

"There are several things we as a corps are hoping to be allowed to better our conditions: a law concerning our subsistence, a cumulative leave, increase of pay for length of service, and eligibility of pension. We hope to get all of this in time; our corps is yet young. With time and our faithful friends to work for us in the future, as they have in the past, we hope in a short time to be able to say that 'even the army nurse is satisfied.'

"I have endeavored to show you something of the trials and tribulations of the army nurse. I would not have you think she has no compensations, because these are many. A nurse having once known the joys and fascination of army service is never quite satisfied with any other work.

PANAMA.—We will proceed with our programme, but before doing so I would make the announcement that we will try very hard to give you a few minutes' time for the discussion of any of these papers that have been presented, and would ask that you have your questions ready to present in such a concise form that as little time will be taken as possible.

EXAMINING BOARDS OF NURSES AND THEIR POWERS

- a. Reciprocal Relations between States
- b. State Census of Training-Schools
- c. The Inspection of Training-Schools

By MISS M. E. CAMERON

New York City

"When, about a month ago, I received from Miss Nutting the request to read a paper entitled 'Examining Board of Nurses and Their Powers' before this assembly, I was caught in a fit of amiability, such as comes but rarely, and with very little thought beyond being complaisant accepted the task most cheerfully. Since then there has come time for reflection, and I stand before you as one of those who 'rush in where angels fear to tread.' Like the little boy from Boston, I have taken a bite which overtakes my masticating powers.

"Remembering the papers on this subject of a year ago, and also the reprint in the *JOURNAL* from the 'Report of the International Council of Nurses,' there is little room for anything in my mind but amazement at my own temerity. The subject of Examining Boards of Nurses is a very new one; indeed, the Examining Board may be considered as our youngest child, the infant to whom we are come, like the fairy god-mothers in the old tale, each bringing our gift of a good wish. It is little to bring, but woe betide us if we do not bring it. It is not yet two years since the New York State Board of Examiners held its first meeting, so that to call upon that or any other State Board of Nurse Examiners for results or experiences would indeed be unreasonable, and very like expecting a newborn child to speak. Yet this State board has shown us some good work and has been characterized by a dignity and harmony of action that give rise to great expectations of what it yet shall do. Whatever the inauguration of the State board may be,—and the different States have so far manifested a desire to express a certain individuality of opinion as to how the Boards of Examiners shall be constituted,—there is to be observed a certain tuning to one note—a bringing of the individual aspect of each State into harmony with a great and democratic idea of registration for nurses—not State registration only. If this idea grows with the growth of registration, it seems reasonable to hope that here we have the key to the problem of the future—reciprocal relations between States in the nursing profession. There must of necessity be a certain uniformity of standards, for we want no such idea of democracy as permits the nurse who has obtained her training where she can do so with the very least sacrifice of time and trouble to herself, and who is careless of her reputation morally and

indifferent to the good name of the profession, to stand shoulder to shoulder with the one who, having a high ideal, lives up to it, and thereby becomes a foundation stone, along with others of her kind, upon which foundation those who come after may safely build. The divorce laws of this country furnish us with a good illustration of the futility of a good law in one State which needs only a trolley-ride of a few miles or a trip on a ferry-boat to carry one beyond its pale. Uniformity of standards, uniformity of curricula—these are signposts for the guidance of those States which are still unorganized. We are a very tremendous body according to the report of the United States Bureau of Education, which gives the number of schools training nurses throughout the Union in the year 1903 as five hundred and fifty-two, and the number of pupils for the same year under instruction as thirteen thousand seven hundred and seventy-nine. The rapid growth of this department of education is shown by a glance at the table of comparative statistics. I need only trouble you to compare the above figures with those of 1880, when the number of schools given is fifteen, the number of pupils, three hundred and twenty-three. A foreigner might ask, 'How is this great body, mostly of women, governed?' and it seems a curious fact that it has been almost without laws until the present era. We have been children hitherto and have not come under the law, but surely the time has come for us to accept our responsibilities, and is it not possible that legislation can be made so that it will fit both East and West and North and South? Foolish optimism it may be to aim beyond what other professions have reached in the matter of reciprocity, but may it not be possible? Somewhere recently I came across the statement that mathematics was the one universal language—everywhere in all the world two and two make four; so I think nursing in its larger things is universal—lesions of the body, dissolution and death, are they not the same everywhere? and wherever proper attention is paid to such changes as go on in our bodies, whether building up or breaking down, there is the possibility of universal practice, and the way to it lies by having our laws in this country at least uniform—not an easy, alipahod, miry lane in one State and a high-walled-glass-on-top-private road in the next—not such laws as allow the offenders in one State to flaunt it with the best by stepping across the boundary into the next, but laws which shall make for us one broad, straight, permanent way, leading to better and better things. Let us have interstate reciprocity by all means, if it be granted only between those States which realize what it is we aim for, and are willing to join in the effort to keep the nursing profession on the forward march.

"State census for training-schools suggests a way for strengthening our organization movement. At present there are, according to the

'United States Bureau of Education Report,' States which may be regarded as virgin soil wherein no man has drawn his plough or planted seed. There is Florida with its one hospital of fifty beds, Montana with one hospital of twenty-four beds, a school of three pupils, and a graduating class of two. The weaker schools in all States could be uncovered by means of State census, and from being a menace, as they now are, continually turning an undesirable class of nurses upon the public, they might be turned into places for the employment of such nurses as find it impossible to keep up with the average. A State census would greatly simplify the work of the Examining Boards, for, of course, the census would include a careful rating of all training-schools. This suggests the need again that the Examining Board employ its own inspectors. Even so early as this the New York State Board of Nurse Examiners has discovered that it is imperatively necessary to have a nurse inspector and have petitioned the Board of Regents for the same. So far the request has not been granted. It would appear to be a good test to apply to the good-will and the rectitude of intention of the Board of Regents to press the matter with all the urgency it deserves. We have been accused as a body of being too modest, of not protesting enough, of leaving our representatives in Senate and Assembly in doubt as to whether we really felt deeply interested in the legislation for our own benefit or not; it may be that we shall prevail by our importunities sooner than by the justice of our demands. If all Examining Boards made this nurse inspector one of their first requirements for equipment, it would probably cease to be regarded as a dangerous concession by the Regents or the Governors. Here is a suggestion for displaying our power of combining and working with concerted action—our State bills have room for more such. Inspection of training-schools and the State census of training-schools are so naturally of our office as to be almost synonymous. The State census would form a large item in the report of the Training-School Inspector.

"Upon the finding of the Training-School Inspector the Board of Nurse Examiners should have power to request the withdrawal of the certificate of registration of any registered school unless the said school give evidence of the desire and the power to bring the school up to the proper standard. The time for adjustment and experiment and reorganization could easily be taken right now. There is no need to hurry out class after class of nurses every year. The present supply can meet the demand. There are many excellent nurses who after fifteen or twenty years of careful and painstaking work find themselves regarded as back numbers. They are refused by registries and are forced to accept the humiliating belief that their profession will not last them a

working lifetime. If this is true, it behooves the training-schools to look for the remedy. It may be that the Examining Boards may be able to offer suggestions for a course of post-graduate work which will benefit this older class. It may be that by greatly lessening the stress and strenuousness of training-school life there may not be such a tremendous call on the vitality of the young pupils, so that the reaction may be delayed till late in life.

"We are told by students of social problems that our hospitals are to grow greatly beyond the proportion of the past, that since the application of the dynamo to machine work of all kinds and the consequent increase of the need for speed and deftness in tending the machines, men and women are wrecked and worn out and left to finish out their existence the victims of exhausted energy. This class, we are told, are bound to come back upon the public in the very near future, and that hospital provision will be found necessary for them as chronic and incurable. If it is true that such an unfortunate class is being created by the strenuousness of the times, it should serve as one more argument for an easier, more leisurely, course in the training-schools. The present system has the fault of requiring so much in every department of superintendents no less than those under them, down to the probationer, who, after all, has the easiest billet there is.

"The Inspector of Training-Schools, besides having a very responsible office, has a most interesting field of labor. With the books of the training-school superintendent and the hospital warden at her disposal, with the freedom of the class- and lecture-rooms, the bedside teaching, and the history- and chart-room open to her, the office is not likely to go begging. Surely it is an office worth working for, and one that means a great deal to the Examining Board; it means that the Regents or the Governor—the higher powers, whoever they may be—will be made to see facts from a nursing point of view, with all the significance these facts may have to the whole profession, and not merely as educational and commercial data collected by a layman.

"The strengthening of the Board of Nurse Examiners and its enlargement by the appointment of nurse inspectors seems to be the next task before us. We cannot allow the great body which we represent to be set aside in this matter. The lay inspector has failed us already—allowing the registration of schools which are not eligible. We need our own inspector. The blunder of a lay inspector is probably due to the Board of Regents regarding nurse-training schools as one more department of the Educational Bureau. We must resort to the old remedy of the hair of the dog that has bitten them. We must teach them better."

PRESIDENT.—In accordance with the announcement made, a few moments will be allowed for the discussion of these papers, and as this last one is still fresh in our minds, we will take that one up now and then work towards the top of our programme.

MISS PALMER.—In reference to Miss Cameron's paper I have just one word to say, and that is that if I were going to draft the New York bill over again, with the light that I have had as an examiner, I would include nurse inspectors as one of the necessary conditions as well as nurses on the Board of Examiners.

MISS CABANIER.—In Virginia the members of the Board of Examiners are made State Inspectors of Training-Schools, and each member is assigned a certain locality.

PRESIDENT.—If there is no further discussion, we will pass on to the discussion of army nursing.

MISS MILLER.—I have been requested to ask Mrs. Kinney how many replies she has had for the Eligible Corps of Nurses.

Mrs. KINNEY.—Since the subject was first approached there have been from the various alumna associations thirteen replies; seventy sets of papers were sent out.

MISS PALMER.—I think that perhaps many of the nurses do not read the medical journals very extensively, but the failure of the nurses to coöperate with the Surgeon-General's office in creating this eligible volunteer list has been very severely criticised by some of the leading medical journals of this country.

MISS DAVIS.—I would like to ask Mrs. Kinney if being a foreigner prevents the nurse from presenting herself and being accepted; whether she would have to become a naturalized citizen to join the Army Nurse Corps; for instance, is it compulsory for an English nurse or a Canadian nurse to become a naturalized citizen before she joins the army.

Mrs. KINNEY.—When the Spanish-American War was over and the Nurse Corps was being established on permanent lines it was at first a matter of necessity that a woman should either be naturalized or a citizen by birth. Later on, however, this requirement was suspended, as it was not considered expedient to shut out on this ground those who wished to enter the service, although I would state that perhaps the preference is always given to American citizens, as I consider that it should be. I am sure that if I should go to England and want to enter the nursing service there I would hardly be considered an acceptable member; I am perfectly sure that I should not be given a place of any prominence or any distinction, if I was accepted at all, even though I might have represented the American army nurses. There is no law prohibiting the employment of any nurse, but to those on the active list of our Army Nurse Corps we do give the preference to American nurses, but on the Eligible Volunteer List I do not think the question would be brought up at all; if anyone was kind enough to offer her services, she would be received with open arms.

Miss McISAAC.—I want to say that I am ashamed of our nurses. I wish the question about the Canadian and the English and the foreign-born women had not come up, because, certainly, there are enough women born in this country to do this work if we are needed. I want to say that I am ashamed of the American-born nurses to think that such an appeal should be made and have met with no response. I am glad the doctors have criticized it, for we deserve it, and I hope that every single delegate will go home to her alumna association and repeat this matter. We ought to be ashamed that such a thing as that

could be said about us. If the excitement of war were on we would all be coming forward in a minute, and we would have the same trouble that there was before. Let us prepare now and not have anything like this come up about us again.

MISS NUTTINS.—On behalf of the Canadians, who have lived so happily and harmoniously in American environments, I would say that I do not think any Canadian or English woman would ever remember what country she belonged to if there came any need for her services. There is something greater than nationality.

PRESIDENT.—I am sure the list will straightway lengthen.

MRS. KINNEY.—I shall be very glad to receive the names of any who may care to leave them with me, simply as an initial step to sending out papers from the Surgeon-General's office after this convention is over.

PRESIDENT.—We will pass on to the paper on the opportunity of the nurse in private duty. If nothing occurs to you, then we will take the discussion of the first paper, that of club-houses, hostels for nurses, etc. I am sure there are very many questions to be asked and answered regarding directories especially; we have had good reports of a very successful central directory in Cincinnati, and I hope there is someone present who can tell us about it.

MISS RINDLAUB.—The Alumnae Association of the Philadelphia Hospital have tried for some time to secure a directory at that hospital and have not succeeded. We would be very glad to hear from any city hospital where such a directory exists as to the methods by which it is managed and carried on, etc.

MISS BRIDGSON.—In the University of Pennsylvania Hospital they have established their own directory in the office of the hospital within the last year.

MISS WHITAKER.—The Hahnemann Hospital, Philadelphia, has had a directory for nurses from the organization of the institution, and they not only have a register for their own nurses, but they have a registry open to all nurses in Philadelphia in good standing.

MISS MILNE.—The Presbyterian Hospital, like the Hahnemann, has had a directory for nurses since the starting of the Training-School.

MISS CUMMISKEY.—The Jefferson Medical College has had a directory for their nurses for ten or eleven years, and this has been kept by the Training-School.

PRESIDENT.—Is there in Philadelphia a central directory?

MISS MILNE.—There is a central directory at the College of Physicians, not managed by nurses.

MISS WHITAKER.—There is a central directory at the College of Physicians, but they are so narrow that they will not admit homoeopathic graduates.

MISS DAVIS gave a sketch of the Boston Nurses' Club and its success in maintaining a general directory.

MISS NEVINS.—I think we all understand perfectly well that a great many hospitals have their own directories, but what we want is to harmonize the different hospitals in cities and have one central directory. In a city like Washington we want a central directory. We have been writing to the different cities, and I did hope to hear from the Cincinnati organization, because it is said that that one has been in working order for about six years and has been a success. Is there no other central directory outside of that city that has been a success? And if it is a success, is a graduate nurse at the head of it, is a doctor at the head of it, or who is at the head of it?

Miss GILES.—In Pittsburg we have a central directory, which I think is not quite so narrow as in Philadelphia. It is managed by the Academy of Medicine in Pittsburg, but they employ a homoeopathic graduate and she has charge of the directory, and it has been a success there; I do not think there is any trouble in the directory at all; it has been a success financially and otherwise. Everything is satisfactory.

Miss NUTTING.—We do not find it difficult to understand that directories so managed have been financial successes. We have very clear accounts from many sources and covering a pretty long period that they have been marked financial successes, so much so, in fact, that it seems to me we ought to feel highly encouraged about undertaking such an enterprise of our own. We are tolerably sure that ultimately the small directory will give way to the larger general directory managed entirely by nurses, which will meet fully the needs of the public. Such a change is in accordance with sound business principles as a saving of machinery, of time, people, and salaries. It is one of the trusts which one would like to promote, and I have no hesitation in suggesting a merger for directories.

Miss DAVIS.—I think that Miss Ayres, from Worcester, could tell us all about this. She comes fresh from doing just that kind of work, and I believe was a little delayed in order to finish up the work of starting this directory.

Miss AYRES.—The graduate nurses in Worcester have organized for the purpose of conducting a central directory, and it is entirely under our control, managed by a nurse with help from some other person. We hope that in a few weeks it will be established and in good running order. I can tell you more about it in another year.

Miss McMILLAN.—We have no central directory, but we are very much interested and hope within the next few months that the State association may organize one.

Miss WOOD.—We have had a registry for the last eight years in St. Paul conducted by a nurse. We have a membership of one hundred and fifteen active nurses and we have not had a particle of trouble.

Mrs. HANGER.—We have a local association of graduate nurses; the membership is about sixty. In connection with this association we have a registry which is controlled by the officers of the association. The registry is conducted by a druggist in his store, and he receives nothing for it. It is absolutely in control of the officers of the association, and the funds are used for its benefit. It is very successful, and the association takes in graduates in good standing of any school.

Miss NEVINS.—Evidently the whole secret of the success of a central directory is lighting upon the right woman for the head,—a fair-minded woman, one in whom all nurses from all schools can have perfect confidence,—and it seems to me that that is all there is to do.

PRESIDENT.—We will be obliged now to close this discussion. We have some reports from committees, and we will now hear from them. There was a committee appointed last year to consider the affiliation of this association with the Red Cross for active service. That committee begs to have its report deferred until another year, but the chair would like to call upon Miss Nutting for some suggestions along that line.

Miss Nutting spoke of the reorganization of the Red Cross; said that in some States, Ohio for one, nurses were on the committee, and thought it a proper time to ask the Superintendents' Society to appoint a committee from that body

to confer with the one from the Associated Alumnae, and would make a motion to the effect that we ask the Superintendents' Society to appoint a committee to confer with the committee appointed by the Associated Alumnae in all work pertaining to affiliation with the Red Cross organization.

Seconded by Miss Rhodes and carried.

PRESIDENT.—We will now listen to the invitations which we have in regard to the meeting-place for next year, and motions to that effect will be in order.

Miss THOMPSON.—The only one I have actually on paper is that from Detroit, from the Detroit Graduate Nurses' Association, which was sent us last year and which has been extended verbally many times before and since.

Mrs. FOURNIER.—I move that the invitation to hold our next convention in Detroit be accepted.

Seconded by Miss Whitaker and carried.

Mrs. Grotter spoke of the help and impetus she felt the holding of the convention in Detroit would be for the Michigan nurses, and assured the Associated Alumnae of a hearty welcome.

Miss CARAWINE.—Richmond, Virginia, will be highly pleased to extend its hospitality, so that if not too premature Richmond extends its invitation now to hold the annual meeting there in 1907.

PRESIDENT.—We will now call for the report of the Committee on Resolutions.

Miss TIFFET.—The Committee on Resolutions has pleasure in presenting the following report:

"Resolved, That the Nurses' Associated Alumnae of the United States, in Eighth Annual Convention assembled, extend to the committee which has expended so much time and thought in the preparation of the excellent and instructive programme presented at these meetings, to the ladies who have prepared and presented the various subjects in such an interesting manner, and to Miss Nevins and the graduate nurses of Washington for the excellent arrangements made for the meetings, the charming reception, and the hospitality shown throughout the week a most sincere vote of appreciation.

"ALICE O. TIFFET,
"EMMA ROTHFUS,
"ANNA M. RINDLAUB."

PRESIDENT.—You have heard these resolutions, and we will place them on file.

Miss HOLLISTER.—I move that a committee be appointed by the president of this association, consisting of two or more superintendents and of two or more members of this association, the number from each side being equal, to consider and map out a plan by which our middle class of people may be nursed in their own homes by graduate nurses, the committee to report at next year's meeting.

Seconded by Miss Frederick and carried.

PRESIDENT.—And now we come to that interesting part of our programme, the report of the judge of election. Miss Milne will present that report to you now.

Miss MILNE.—It is my pleasure to announce to you that the following officers were elected: President, Miss Annie Damer; first vice-president, Miss Georgia M. Nevins; second vice-president, Miss Jane A. Delano; secretary, Miss Nellie M. Carey; treasurer, Miss Annie Davids; directors, Miss Harriet Fulmer and Miss Mary M. Riddle.

Miss RIDDLE.—I have the great honor to present to you your new president, Miss Annie Damer. [Applause.]

MISS DAKIN.—It gives me great pleasure to receive this welcome from the members, and while I recognize the difficulties in our way, I appreciate also the growth of interest and coöperative work that has characterized our association in the last four years, since I had the honor of being elected before. I now ask for that coöperation still further, especially as you know that a change of officers makes it so much harder for us to take up the work and carry it on just where it was left off. But in going away from this great gathering which has been such an inspiration and such a help to us, we feel that we must carry this inspiration back to our homes. I say again that I appreciate your reception and the great honor you have done me, and I hope that we will have even a more enthusiastic meeting, if that were possible, next year when we meet in Detroit.

MISS NEVINS.—I think the association should give a rising vote to show its appreciation to the outgoing president for her splendid work in this association.

Vote unanimous.

MISS DAVIS.—Madam President, we have some other outgoing officers to whom this association should give a rising vote in appreciation of their services and their great work, and that is the secretary and treasurer.

MISS FREDERICK moved that a rising vote of thanks be given the treasurer and secretary.

Seconded and carried by a unanimous vote.

MISS RUSSEL.—I would like to say for the outgoing people that we wish that we had it all to go over again and knew as much as we know now to begin with.

MISS DAKIN.—Before adjournment we would like to call a meeting of the new officers and directors of the association to meet immediately after adjournment to appoint the Executive Committee for the following year. Also remember that before leaving the delegates and voting members must get together and appoint a Nominating Committee for the next year.

The following nominations were made for members of the Nominating Committee: Miss Whitaker, of Philadelphia; Miss Keith, of Rochester; Miss Canahan, of Richmond, Va.; Miss Tippet, of Boston; Miss Drown, of Boston; Miss Hanson, of Philadelphia; Miss Brocken, of Philadelphia; Miss Keating, of Buffalo; Miss Miner, of Richmond; Miss Ollen, of Pittsburg.

MISS WHITAKER.—I move that the result of the election of a Nominating Committee be made known to the Executive Committee.

Motion seconded by Miss Rhodes and carried.

The meeting was declared adjourned to meet in Detroit in 1906.

Miss Agnes D. Randolph, judge of election for members of the Nominating Committee, handed to the Executive Board the following names of members elected to the office: Miss M. Margaret Whitaker, Philadelphia; Miss S. H. Canahan, Richmond; Miss Mary L. Keith, Rochester; Miss Emma J. Keating, Buffalo; Miss Alice O. Tippet, Cromwell, Conn.

[Members wishing to look over former records of the Associated Alumnae will find a complete file in the library of the Bureau of Education and in the Congressional Library in Washington, in the New York Public Library, and in the Education Department of the State of New York in Albany.]

Respectfully submitted,

MARY E. THORNTON,
Ex-Secretary.

August 1, 1905.

ADDRESSES OF SECRETARIES OF ALUMNÆ ASSOCIATIONS HAVING A MEMBERSHIP IN THE NATIONAL ASSOCIATION

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Miss JESSIE B. FOSTER,

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AUGUSTANA HOSPITAL, CHICAGO,

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BALTIMORE CITY HOSPITAL,

Miss SARA WARD,

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Miss EMMA L. SNYDER,

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Miss SARAH A. EGAN,

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Miss BESSIE COWLING,

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Miss MARY BREED ROBINSON,

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Miss ELIZABETH MORTON,

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